



**Residential Life Roommate Agreement**

Fill out this agreement at a scheduled time with your roommate(s) to discuss. **Only one Roommate Agreement should be completed and submitted per group.** This questionnaire and any agreements should be kept visible and accessible at all times. This document serves as a conversation starter to ensure a liveable on-campus experience for all.

Your Community Coordinator is able to assist you with completing this questionnaire by reaching out to schedule a day and time. Submit your agreement to your CC when completed.

Set a mid-semester check in date at the end and re-evaluate when necessary.

**Part 1: Personal Information**

Name: \_\_\_\_\_ Building: \_\_\_\_\_  
 Pronouns: \_\_\_\_\_ Room Number: \_\_\_\_\_  
 Allergies (dietary restrictions): \_\_\_\_\_

Name: \_\_\_\_\_ Building: \_\_\_\_\_  
 Pronouns: \_\_\_\_\_ Room Number: \_\_\_\_\_  
 Allergies (dietary restrictions): \_\_\_\_\_

**If Triple or Four Room, complete additional section:**

Name: \_\_\_\_\_ Building: \_\_\_\_\_  
 Pronouns: \_\_\_\_\_ Room Number: \_\_\_\_\_  
 Allergies (dietary restrictions): \_\_\_\_\_

Name: \_\_\_\_\_ Building: \_\_\_\_\_  
 Pronouns: \_\_\_\_\_ Room Number: \_\_\_\_\_  
 Allergies (dietary restrictions): \_\_\_\_\_



**Part 2: Agreed Ideal Living Conditions**

In this section, please discuss with every roommate as a group and come to a consensus on an ideal living environment for the year by having discussions on various topics.

**REMINDER:** This process works best when each resident is authentic and true regarding each question, do not try to be someone you are not!

If you need guidance at any time throughout this process, please contact your Community Coordinator.

**Sleep Conditions:**

1. Bed time (person #1): \_\_\_\_\_ Wake up time (person #1): \_\_\_\_\_  
 Bed time (person #2): \_\_\_\_\_ Wake up time (person #2): \_\_\_\_\_  
 Bed time (person #3): \_\_\_\_\_ Wake up time (person #3): \_\_\_\_\_  
 Bed time (person #4): \_\_\_\_\_ Wake up time (person #4): \_\_\_\_\_

2. We will sleep best when the room is (indicate all that apply):

- a. Dark
- b. Cool
- c. Warm
- d. With a night light
- e. Silent
- f. Some noise/music playing/fan on
- g. Other: \_\_\_\_\_

3. When setting an alarm, our expectation is that each of us can (indicate all that apply):

- a. Wake up the first time it goes off
- b. Press snooze multiple times
- c. Sleep through all the alarms
- d. Set multiple alarms
- e. Keep my alarms very loud
- f. Do not use alarms

(If Applicable) For guests staying overnight, the Office of Residential Life has a policy of guests staying for a reasonable amount of time, 3 nights max recommended. However, if all roommates agree upon a guest staying for a longer period of time, then everyone must be in agreement with the time period of: \_\_\_\_\_ nights. **Please make sure that when guests stay overnight, it is promptly communicated with everyone in the shared living space.**



**Study Preferences:**

4. List out each roommate name next to their study time preference(s):

Morning (6 AM - Noon): \_\_\_\_\_

Afternoon (Noon - 5 PM): \_\_\_\_\_

Evening (5 PM - 10 PM): \_\_\_\_\_

Late Night (10 PM - 6 AM): \_\_\_\_\_

5. We will study/complete assignments in the following spaces: *Examples- Library, Academic Building, Lounge, Room, Off-Campus, etc.*

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6. When studying/completing assignments in the room, our optimal room conditions are (indicate all that apply):

- a. Quiet
- b. Some background noise
- c. Music playing
- d. Conversations taking place
- e. No guests over
- f. Some guests can be in the room
- g. Other: \_\_\_\_\_

**Room Preferences:**

7. Regarding personal items, we all agree to:

- a. Share or borrow with all roommate(s) at any time
- b. Allow any roommate to use certain belongings without our permission
- c. Ask to use all belongings with expressed permission first before using/taking items
- d. Not to share or borrow anything

8. Please list agreed belongings that roommate(s) can borrow without permission: *Examples- dishware, phone charger, textbooks, cleaning supplies, nothing, etc.*

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9. We prefer the room to be:

- a. Neat and clean at all times
- b. Sometimes neat and clean
- c. Never neat and clean
- d. Cleaned throughout the week
- e. Other: \_\_\_\_\_



10. When cleaning the room, we feel that:
- a. Roommate(s) should take turns cleaning based on a schedule we create together
  - b. Roommate(s) should clean our own respective areas/space
  - c. Roommate(s) should clean together at an agree upon day and time
  - d. Other: \_\_\_\_\_

11. For safety and security reasons, we agree to lock the room:
- a. Always
  - b. Whenever we leave the room (even if still in our residential building)
  - c. Whenever we are leaving the building

12. Each of us would like to have private time alone in the room this often (indicate each roommate(s) preference):  
*Examples- for a few hours each day, a few times each week, I never need to be alone, etc.*

Person #1: \_\_\_\_\_  
 Person #2: \_\_\_\_\_  
 Person #3: \_\_\_\_\_  
 Person #4: \_\_\_\_\_

**Masking/Gatherings/Guests:**

13. We would prefer that there are no visitors in our room:
- a. After \_\_\_\_:00 (am/pm)
  - b. It depends, and we should discuss it when wanting to invite guests each time
  - c. Visitors are always welcome
  - d. Other: \_\_\_\_\_

14. We agree that guests or visitors can be left alone in our room:
- a. Never
  - b. Only for short periods of time
  - c. For any agreed duration
  - d. Other: \_\_\_\_\_

**Roommate Dynamics:**

15. If a roommate has a conflict with another roommate, we would want the roommate to:
- a. Tell the person right away and talk about it with them
  - b. Bring up the issue and give the person time to process and discuss later



c.

Other: \_\_\_\_\_  
\_\_\_\_\_

16. When any of us are upset or stressed, below is what each person needs to do:

*Example- To talk things out, get some space and time to deal with it on my own, to blow off steam then move forward, etc.*

Person #1: \_\_\_\_\_  
Person #2: \_\_\_\_\_  
Person #3: \_\_\_\_\_  
Person #4: \_\_\_\_\_

17. We decompress by: *Example- watching TV, reading a book, hanging out with friends, etc.*

Person #1: \_\_\_\_\_  
Person #2: \_\_\_\_\_  
Person #3: \_\_\_\_\_  
Person #4: \_\_\_\_\_

18. When any of us had a bad day, as a roommate(s), we could help by (indicate each preference):

- a. Inviting that person for a walk around campus
- b. Planning to get food together on or off-campus
- c. Watching their favorite TV show/movie in our free time
- d. Other: \_\_\_\_\_

19. Something to be mindful about, our biggest pet peeves are:

Person #1: \_\_\_\_\_  
Person #2: \_\_\_\_\_  
Person #3: \_\_\_\_\_  
Person #4: \_\_\_\_\_

20. We have agreed that as roommate(s) not to bring \_\_\_\_\_ into our shared space. *Examples- items due to allergies, etc.*

21. We typically spend our weekends: *Examples- exploring the city, doing coursework, hanging out with friends on-campus, etc.*

Person #1: \_\_\_\_\_



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Person #2: \_\_\_\_\_

Person #3: \_\_\_\_\_

Person #4: \_\_\_\_\_

22. Our preferred method of communication is: *Example- text, email, talk in person*

23. Write down anything else that you all think each roommate should know to confidently live together for the year:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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**Once you have completed and reviewed this document with each roommate(s) as a group, please sign below on a signature line.**

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

We will meet again as a group on \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ to check in with each other and make any adjustments to this roommate agreement as necessary. The Office of Residential Life recommends having a follow-up meeting during the mid-semester (around October).