All housing will be provided in The Patrick Henry residence hall. This housing preferences form should be completed and returned along with your signed Residence Life Housing Contract.

Your Name _______________________________
Program _________________________________
Age:_______ Gender:________ Returning Patrick Henry Resident: __________

Please indicate if you have a roommate preference (include first and last name):
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

*NOTE: All individuals must list each other in order for the request to be considered.

Would you prefer your roommate be someone of your program? Yes _______ No _______

Do you smoke? Yes _______ No _______

Use the space below to list the qualities you prefer in a roommate. Please be as specific as possible:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________