

Oxford Overseas Study Course Housing Preferences

Name: _____

I. Roommate Preferences

A. I prefer _____ a single room _____ a double room.

My preferred roommate is _____
(Please note that both parties must indicate that they wish to room together for your request to be considered.)

B. I _____ smoke _____ do not smoke.

I _____ object _____ do not object to a roommate who smokes.

II. Study Habits

A. I prefer to study
_____ late at night
_____ during the evening
_____ during the day
_____ in my room
_____ elsewhere.

B. While studying, I _____ do _____ do not listen to music.

Preferred kind of music: _____

III. General Tidiness

I am _____ neat and tidy
_____ messy
_____ somewhere in between.

IV. Other

Please indicate any allergies, special health needs, or other considerations that affect your living circumstances.

