

**SOUTHERN SCHOLARSHIP FOUNDATION
ROOMMATE MATCHING FORM**

This form will be given to your House Manager to assist with room assignments. Please be as detailed as possible so that the House Manager can assign a roommate that is compatible.

Name:	Nickname/Preferred Name:
Semester arriving:	Cell Number:
If your house is two levels, would you prefer to live upstairs or downstairs?	
Do you plan to spend more time at home or out of the house?	
Do you tend to stay up late or go to bed early?	
Are you a light or heavy sleeper?	
What time of day do you prefer to study (early morning/late night)?	
Do you prefer to study with background noise (music/TV)?	
Do you prefer to listen to music from speakers or with earbuds/headphones?	
In regards to your room, are you: <input type="checkbox"/> Always neat <input type="checkbox"/> Sometimes neat <input type="checkbox"/> Never Neat	
Is religion important to you and if so, is it important that your roommate share your religious beliefs? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:	
Is it important that your roommate have the same COVID vaccination status as you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please share your status: <input type="checkbox"/> Vaccinated and boosted <input type="checkbox"/> Unvaccinated <input type="checkbox"/> Vaccinated, not boosted <input type="checkbox"/> I prefer not to disclose (this will be considered as unvaccinated for the purpose of roommate matching).	
NOTE: We cannot guarantee roommate(s) with the same status, however, we will try our best to accommodate as space allows.	
Do you have any specific dietary restrictions (gluten free, lactose intolerant, vegan, vegetarian or other eating needs or preferences)? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:	
Any other comments you would like us to consider?	