

The Village Apartment - Roommate Agreement

Instructions:

- Read and complete each item.
- Each roommate/Suitemate should make his/her individual response. Being honest will save time and minimize hurt feelings later.
- If responses to questions are different, discuss that difference and try to reach an understanding that roommates can live with.
- Write down your agreements. If there are things not listed in the agreement that you feel may be important to you, write them down and discuss them too.
- After the Roommate Agreement has been signed, return it to your RA for safekeeping and for Housing & Residence Life records.
- If problems arise, start with discussion. If you want a mediator, utilize your RA or Housing Coordinator.

Roommate Bill of Rights

The basic rights of a roommate include:

- ✓ The right to read and study free from undue interference in one’s own room. Unreasonable noise and other distractions inhibit the exercise of this right.
- ✓ The right to sleep without undue disturbance from noise, guests of roommate, etc.
- ✓ The right to expect that a roommate will respect one’s personal belongings.
- ✓ The right to a clean environment in which to live.
- ✓ The right to free access to one’s own room and facilities without pressure from a roommate.
- ✓ The right to privacy.
- ✓ The right to houseguests with the exception that guests are to respect the rights of the host’s roommate and other hall residents.
- ✓ The right to conflict mediation. Residence hall staff members are available for assistance in settling conflicts.
- ✓ The right to be free from fear of intimidation, physical and/or emotional harm.
- ✓ The right to expect reasonable cooperation in the use of room-shared appliances (such as the TV, micro-fridge, etc.)
- ✓ The right to be free from pressure or ridicule regarding your lifestyle choices.

Please print legibly

Resident Name

A _____
 B _____
 C _____
 B _____

Room #: _____
 RA Name: _____

I. Community Living:

*Check those that apply

Use of Each Other’s Belongings (Sharing is Caring)

Roommate A: _____	Roommate B: _____	Roommate C: _____	Roommate D: _____
You may use these possessions of mine:	You may use these possessions of mine:	You may use these possessions of mine:	You may use these possessions of mine:
<input type="checkbox"/> Movies/DVDs/Video Games	<input type="checkbox"/> Movies/DVDs/Video Games	<input type="checkbox"/> Movies/DVDs/Video Games	<input type="checkbox"/> Movies/DVDs/Video Games
<input type="checkbox"/> TV/DVD Player/ Game system	<input type="checkbox"/> TV/DVD Player/ Game system	<input type="checkbox"/> TV/DVD Player/ Game system	<input type="checkbox"/> TV/DVD Player/ Game system
<input type="checkbox"/> Clothes	<input type="checkbox"/> Clothes	<input type="checkbox"/> Clothes	<input type="checkbox"/> Clothes
<input type="checkbox"/> Personal Care Items	<input type="checkbox"/> Personal Care Items	<input type="checkbox"/> Personal Care Items	<input type="checkbox"/> Personal Care Items
<input type="checkbox"/> Computer and related equip.	<input type="checkbox"/> Computer and related equip.	<input type="checkbox"/> Computer and related equip.	<input type="checkbox"/> Computer and related equip.
<input type="checkbox"/> Appliances	<input type="checkbox"/> Appliances	<input type="checkbox"/> Appliances	<input type="checkbox"/> Appliances
<input type="checkbox"/> Food	<input type="checkbox"/> Food	<input type="checkbox"/> Food	<input type="checkbox"/> Food
<input type="checkbox"/> Temperature : _____	<input type="checkbox"/> Temperature : _____	<input type="checkbox"/> Temperature : _____	<input type="checkbox"/> Temperature : _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> If you borrow something of mine: _____	<input type="checkbox"/> If you borrow something of mine: _____	<input type="checkbox"/> If you borrow something of mine: _____	<input type="checkbox"/> If you borrow something of mine: _____

II. Courtesy Hours:

*Establish acceptable hours, to engage in the following categories:

Roommate A:	Roommate B:	Roommate C:	Roommate D:
*Example= Sleeping: 1am-9am	*Example= Sleeping: 1am-9am	*Example= Sleeping: 1am-9am	*Example= Sleeping: 1am-9am
<input type="checkbox"/> Sleeping: _____	<input type="checkbox"/> Sleeping: _____	<input type="checkbox"/> Sleeping: _____	<input type="checkbox"/> Sleeping: _____
<input type="checkbox"/> Studying: _____	<input type="checkbox"/> Studying: _____	<input type="checkbox"/> Studying: _____	<input type="checkbox"/> Studying: _____
<input type="checkbox"/> Personal: _____	<input type="checkbox"/> Personal: _____	<input type="checkbox"/> Personal: _____	<input type="checkbox"/> Personal: _____

III. Visitation

*Check the one that applies:

Guests:

Roommate A:	Roommate B:	Roommate C:	Roommate D:
Guest will be allowed when:	Guest will be allowed when:	Guest will be allowed when:	Guest will be allowed when:
<input type="checkbox"/> Welcome Anytime	<input type="checkbox"/> Welcome Anytime	<input type="checkbox"/> Welcome Anytime	<input type="checkbox"/> Welcome Anytime
<input type="checkbox"/> I'm not trying to sleep	<input type="checkbox"/> I'm not trying to sleep	<input type="checkbox"/> I'm not trying to sleep	<input type="checkbox"/> I'm not trying to sleep
<input type="checkbox"/> I'm home and not studying	<input type="checkbox"/> I'm home and not studying	<input type="checkbox"/> I'm home and not studying	<input type="checkbox"/> I'm home and not studying
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

Significant Others:

Roommate A:	Roommate B:	Roommate C:	Roommate D:
Significant others are okay:	Significant others are okay:	Significant others are okay:	Significant others are okay:
<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime
<input type="checkbox"/> When I'm not trying to sleep	<input type="checkbox"/> When I'm not trying to sleep	<input type="checkbox"/> When I'm not trying to sleep	<input type="checkbox"/> When I'm not trying to sleep
<input type="checkbox"/> If _____	<input type="checkbox"/> If _____	<input type="checkbox"/> If _____	<input type="checkbox"/> If _____
<input type="checkbox"/> Not Okay	<input type="checkbox"/> Not Okay	<input type="checkbox"/> Not Okay	<input type="checkbox"/> Not Okay

If there is at least (1) resident under the age of 21 the entire suite is DRY, therefore NO alcohol is allowed.

IV. Cleaning Standards

- Establish cleaning schedule- See attached chart to get you started ☺
- Cleaning Chart was established- Date: _____

V. Conflict Resolution

When a conflict arises, we will compromise as follows (Examples: Violation of the agreement, Noise level): _____

VI. Additional Comments:

Use this space for any additional comments of items that were not otherwise covered in this agreement and suggest how you will address them. You may also use the space to add further comments about topics that have already been discussed.

VII. Signatures:

We, as roommates enter into this agreement in good faith. We fully intend to abide by all policies that we have made and as they are written in the Residence Life Handbook.

Roommate A: _____ Date: _____ Roommate C: _____ Date: _____
 Roommate B: _____ Date: _____ Roommate D: _____ Date: _____

Resident Assistant: _____

