

Roommate/Apartment sharing Questionnaire

During the interview, both of you may want to answer these questions for each other. Use and modify this outline as you see fit.

The Basics

Name _____ Age _____ Phone # _____ Email: _____

This section is about getting to know your roommate. You might find that you have some things in common, and it will be a great way to start a conversation.

What do you do for fun/activities?

What are your Hobbies?

What are your favorite TV shows/movies/actors and actresses/musical artists?

What are your favorite foods?

What's your current living situation? _____

Why are you looking to change it/What are you looking for? _____

When would you need/want to move in? _____

How long do you expect to need/want to live together? _____

Living style

This section will reveal what life in the apartment might be like. Based on these answers, you can make arrangements that'll be beneficial for the both of you.

Do you smoke? YES ___ NO ___ Are you ok living with a smoker? YES ___ NO ___

Social drinker? YES ___ NO ___ Are you ok living w/Social drinker? YES ___ NO ___

Do you use illegal drugs or allow them to be used in your home by others? YES ___ NO ___

Any allergies or other health conditions that I should be aware of and/or need any accommodation?
(This is important because you wouldn't want to bring peanut butter if your roommate is badly allergic to peanuts, or get an apartment with stairs if your roommate cannot use stairs) YES ___

How often do you expect to have guests?

Do you expect overnight guests? YES ___ NO ___ If yes, how often?

How far in advance should we notify each other of overnight guests? How long can guests stay over?

What about overnight guests of the opposite sex and/or romantic relationships?

Do you expect your roommate to leave the apartment if a significant other comes over?

Do you plan on spending a lot of time in the apartment, or do you plan to be out and about?

What time do you generally wake up in the morning?

What time do you generally go to bed at night?

What time should the apartment be quiet?

What's your tolerance for noise (music/TV)?

Logistics

How much space do you need?

How hot or cold will you keep the apartment?

What are you bringing to share? (furniture, appliances, kitchen items, Hairdryer, etc)

How clean do you want to keep the apartment? How often will we clean?

Who has what chore responsibilities (For example, who takes out the trash? Does the dishes, lawn work/snow shoveling, etc.)

Do you have a vehicle? YES ___ NO ___

Do you have pets? _____ Are you OK living with pets? _____

Sharing

How do you propose to share, if applicable, some or all of the following:

Food

Cooking/Meal planning ___

Clothes

Errands/ Shopping

Kitchen and Kitchen Utensils? YES ___ NO ___

Telephone? YES ___ NO ___

Internet/Computer? YES ___ NO ___

Are you willing to share: Bathroom? YES ___ NO ___

Other? _____ YES ___ NO ___

What items are you definitely NOT sharing?

SERVICES & CASH

Are you employed? YES ___ NO ___

Rent is \$_____ per month/week and \$_____ per month/week for **utilities** (or, alternatively, explain how utilities are to be handled). Is that in your budget? YES ___ NO ___

Are you interested in receiving a discount in rent for smaller room, performing chores, providing rides, etc.? YES ___ NO ___ (If yes, explore further) _____

ARE YOU WILLING TO PROVIDE REFERENCES?

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

OTHER

Is there anything else I should know about you and your needs to help me determine whether we should enter into an agreement to share an apartment?