ROOMMATE QUESTIONNAIRE
MILWAUKEE CAMPUS

If you will be looking for a roommate when you arrive in Milwaukee and would like to be included in the Student Housing Book as well as online as seeking a roommate, please fill out this questionnaire and return it to the address listed below or email to bbrennan@mcw.edu as soon as possible.

Sue A. Haldemann, Ph.D. - Coordinator of Student Support Services
Medical College of Wisconsin
Milwaukee, WI 53226

(Please type or print legibly)

Name ___________________________ E-mail address ___________________________

Hometown _______________________ Undergraduate Institution __________________

Best time of the day to call ____________________

Medical Student or Graduate Student 1stYearMed 2ndYearMed 3rdYearMed GRAD

Do you have an apartment in the Milwaukee area at the present time? __________________________

If YES, give the address of the apartment __________________________

How many roommates do you need? __________________________

What would be each person’s share of rent and utilities? __________________________

Which utilities are included? __________________________

Is parking available? _______ Indoor? _______ Are there laundry facilities? _______

Other amenities __________________________

If NO, How many roommates do you need? _______

How much would you be able to spend on rent and utilities? __________________________

Do you have a preference for living with males or females? _______ If so, what is your preference? _______

Are you a smoker? _______ Do you care if your roommate smokes? _______ If their guests smoke? _______

What are your hobbies or other interests? __________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

_________________________________________________________________

What qualities are you looking for in a roommate? __________________________

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_________________________________________________________________

Does it matter to you how far you live from school? _______

If so, what is the furthest distance that you would consider living from school? __________
Would you like to prepare meals as a group or alone?

How important is it to you that the house be kept neat?

Do you mind any pets? _____ Are you allergic to any pets? _____ If so, what kind? ________________

Will you be bringing any pets? _______ If so, what kind? ________________

Would you mind if your roommate had his/her girlfriend/boyfriend spend the night? __________________

Do you plan on keeping the same apartment over the summer for the following year? __________________

How important is it to you to interact with your roommate on a personal (brotherly or sisterly) basis? ______

Do you listen to music or watch television a lot? __________________

Would it bother you if your roommate listens to music or watches television a lot? __________________

Any other comments?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

The roommate list is a listing of incoming freshmen medical and graduate students looking for roommates. It is provided to help you locate and contact others in your class; it is not a roommate matching service.

If you find a roommate, please contact our office so that your classmates will not waste valuable time and money trying to reach you (414) 955-8256.

Before you agree to live with anyone, be sure to discuss the questions on the Roommate Questionnaire to increase your chances of finding a compatible roommate.

Please provide your summer mailing address:

Name: ________________________________

Address: ________________________________

________________________________________________________________________

________________________________________________________________________

You will be given access to the list through D2L (https://mcw.desire2learn.com) once your questionnaire is received and you are given your MCW email address.