## **Roommate Agreement**



Communication is the single-most important factor in building good relationships with your roommate(s). By working with each other, this roommate agreement will help you and your roommate(s), with the assistance of your Resident Advisor (RA) or Community Director (CD), begin the process of discussing issues that have often been found to be sources of conflict. Many roommates will assume they know how someone feels, which could potentially be different from the truth. Once a potential conflict is identified, it can be resolved through open communication before a major problem develops. Your RA is here to help

guide the conversations in the beginning and if a problem does arise.

Be honest with yourself and your roommate(s) now, so issues can be addressed **before** they arise.

This is a helpful process to go through whether living oncampus now, or off-campus later in life. Each member of a particular room, suite, or apartment will complete a copy of this form. Be aware that if a roommate change occurs, you and your new roommate(s) will develop a new agreement. Remember to keep a copy to refer back as needed.

For most questions, you may check all boxes that best fit

Remember: Communication is the key!			your response.				
1st Meeting Date			2nd Meeting Date				
General Information							
Building		Room #/ _etters	RA				
This section is for all to input any important information you feel your other roommates may want to know about you, or feel they should know. This is to help make sure you feel comfortable in your space. Topics to consider are dietary restrictions, religious practices, how you may identify, if you have a significant other, etc. Your RA will also be taking time throughout the semester to get to know you, but this will help spark conversations!							
Name	Preferred Name	Gender Pronouns	Information				

## **Cleanliness**

Wash dishes after using them Vac	We will clean:  Daily Bi-Weekly  Weekly As Needed  Comments/schedule:  t away any personal items shared spaces cuum/dust her/additional:	General cleaning supplies will be purchased:  On a rotation basis  With the cost split each time Other/additional:
Use of Space		
Study time(s) in the space will be:  9 a.m Noon Noon-5 p.m. 5-10 p.m. 10 p.m Midnight Midnight-9 a.m. Other/additional:  10 a.m Noon Noon-5 p.m. 5-10 p.m. 10 p.m Midnight Other/additional:	Study atmosphere in the space will be:  Silent Low music Low TV volume No distractions Anything goes Other/additional:	Room temperature will be set at:  Suite/apt. style Traditional halls    <65
Time of Day Routine (write names in and any I like to stay up late: I like to wake up early:	y additional information):	
I am an afternoon/early evening person:		

Roommates can use e	each other's:					
Appliances		Clothes	without asking	g	Clarify differences	
(Coffee maker, Food/drink	etc.)	Other items:	only after aski		,	
Personal care i			only if immed			
TV/Stereo			returned as is	,		
Computer						
	ure allowed to					
Guests in our space a	_	laa akbaw'a waxaanal balam	ainan Additional o			
Sit on/ use each	ur's dock	Jse other's personal belong	gings Additional co	omments:		
chair/ furniture		Jse other's computer				
Eat other's food	1					
Sleeping time(s) in th	e space will be:	While other(s) are slee	ping in the space, it is o	kay to:		
9 a.m Noon		Make noise		Use h	nair dryer	
Noon-5 p.m.		Listen to music		Other	r/additional	
5-10 p.m.		Keep overhead li	ght on (if applicable)			
10 p.m Midn	ight	Have guests over				
Midnight-9 a.n	۱.	Use microwave/a	ppliances			
Other/additiona	al:	Keep desk light of	on (if applicable)			
		Watch TV				
Definitions						
Deminitions	)					
"Quiet":						
"Privacy":						
"Offensive language":						
(whether in person, movies, or music)						
, , , , , , , , , , , , , , , , , , , ,						
Personal Habits						
If leaving for a weekend/period of time, we will:						
Notify each other						
Not notify each other						
Other/additional						
For traditional halls: Ho	w will we request privat	e time in the room?		How far ahe	ad of time?	

## **Alcohol**

The legal drinking age in the State of Alabama is 21 years of age. For further information regarding policies referring to alcohol possession and consumption, please visit housing.ua.edu/community-living-standards.

## **Plans of Action**

While it is important to have face-to-face i meet in person, consider these options.	nteractions with your ro	ommates regarding conflicts that may arise, if it isn't feasible to				
Preferred means of communication with room	nmate(s) during conflict:					
Speaking face-to-face	Communicating via social media					
Communicating over email Other/additional:						
Communicating via text message	Communicating via text message					
Mediation with a staff member (RA/CD) if conflict persists						
If one of us is bothered by the action of the other, we should:  As conflicts may arise, we agree to:						
Immediately voice our concerns by talking		Not post the conflict on social media				
Step away from the situation until we down before talking	Step away from the situation until we've had time to calm down before talking  Not gossip with others about it.					
Other/additional:						
Food or drink consumed that is not ours, will be:						
Replaced within three days	Replaced within three days Other/additional:					
Replaced within a week	Replaced within a week					
Not replaced (what's mine is yours)						
We would like to						
Only revisit/revise this agreement form if one of the roommates wants to at a later date						
Set a date now to revisit (and revise if	Set a date now to revisit (and revise if needed) this agreement form ( <i>Put date in "2nd Meeting Date" box on page 1 of this form</i> )					
*Note: The RA/CD may revisit this agreement	with roommates as nee	ded during the year.				
We are entering into a good-faith agreement with each other to make the most of our living arrangements this year. As issues arise, we promise to first communicate openly with each other. This form is only a starting point for open communication. As needed, we will refer back to this form and seek counsel of the RA/CD.						
This form should be printed and signed by ea	ch roommate. A copy sho	ould be kept in the room/suite and a copy with the RA/CD.				
Roommate Printed Name		Roommate Signature				
RA/CD Signature	Date					

At some point, your RA/CD may want to revisit this agreement with you and your roommate(s) to see if any updates need to be made