

**Student Affairs Office  
Room 105C  
718 340-4207  
Student\_Affairs@mail.law.cuny.edu**

**ROOMMATE INFORMATION FORM**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**ROOMMATE PREFERENCES:**

Male only       Female only       No preference

Pets (OK / No )      Smoking (OK / No )      I Have a Dog/Cat

**SPECIAL REQUIREMENTS:** (e.g., location, price range, etc.)

\_\_\_\_\_  
\_\_\_\_\_

*I give my permission to make this information available to interested students.*

\_\_\_\_\_

**SIGNATURE OF APPLICANT**