

For Office Use

Placed? Yes No Housing Assignment _____ Roommate(s) _____
Student ID# _____ Extension _____

TRINITY COLLEGE
Trinity International University, Deerfield, Illinois
REQUEST FOR ROOM RESERVATION, 2006-2007



Please fill out this room request form. The following information will be used to match you with a roommate and place you in a resident hall. Please return this form with a **\$100 tuition deposit** and a **\$50 room deposit**. Room assignments will not be made without receipt of the deposits. *This form is not required for commuters.*

Personal Information

Requesting room reservation for: Fall 2006 Spring 2006
Sex: Male Female

Today's Date

Last Name First Name M.I. Preferred Name

Address City State/Prov. ZIP

Phone Email Date of Birth Age

Home Church Denomination

High School Attend Graduation Date (Year)

Other Colleges Attended I will be a: Freshman Transfer
 Other: _____

Intended Major and Vocational Goal(s)

Room Preferences

Residence Hall Preference (if any): Male Housing: Carlson Owens Quad 3 _____
Female Housing: Johnson Madsen Quad 4 Suite Preference (if any)

Roommate Preference (if any) Is your roommate preference a: New Student
 Current Student

*Please note: Efforts will be made to accommodate requests, but requests cannot be guaranteed. Preference requests must be mutual and received from all roommates by **June 1st for fall enrollment**.

Do you have any physical limitations?

Activities and Interests

Summarize your activities/interests in church and school in the past two years

Check the following activities in which you have an interest:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Basketball | <input type="checkbox"/> Chamber Orchestra | <input type="checkbox"/> Concert Band |
| <input type="checkbox"/> Concert Choir | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Drama | <input type="checkbox"/> Football |
| <input type="checkbox"/> Gospel Choir | <input type="checkbox"/> Intramurals | <input type="checkbox"/> Jazz Band | <input type="checkbox"/> Pep Band |
| <input type="checkbox"/> School Newspaper | <input type="checkbox"/> Soccer | <input type="checkbox"/> Softball | <input type="checkbox"/> Student Activities |
| <input type="checkbox"/> Student Government | <input type="checkbox"/> Student Ministries | <input type="checkbox"/> Volleyball | <input type="checkbox"/> Yearbook |

Others activities not listed:

Will you be playing a collegiate sport at Trinity? If yes, check all that apply:

- | | | |
|-----------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Basketball | <input type="checkbox"/> Football |
| <input type="checkbox"/> Soccer | <input type="checkbox"/> Softball | <input type="checkbox"/> Volleyball |

Yes

No

Would you consider yourself to be a: Morning Person (i.e. arise between 6-8am) Late Night Person (Past Midnight)

When you study do you prefer (select one):

- Very Quiet
- Moderately Quiet (TV/Stereo on)
- No Preference

In your free time would you (select one):

- Prefer to have friends over
- Prefer a quiet room
- No Preference

Select three items from the list below that best indicate your taste in music, ranking them 1-3:

- | | | | |
|--|---|---|---------------------------------------|
| <input type="checkbox"/> Alternative | <input type="checkbox"/> Christian Contemporary | <input type="checkbox"/> Classical | <input type="checkbox"/> Classic Rock |
| <input type="checkbox"/> Country/Western | <input type="checkbox"/> Gospel | <input type="checkbox"/> Grunge/Progressive | <input type="checkbox"/> Jazz/R&B |
| <input type="checkbox"/> Opera | <input type="checkbox"/> Rap | <input type="checkbox"/> Top 40 | <input type="checkbox"/> Other: _____ |

Is there any type of music that you cannot tolerate?

Personal Qualities: On a scale of One to Five, "5" being the **Greatest** and "1" being **Least**, please rate the following:

	1	2	3	4	5
How important are your studies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How important is it to you to have a roommate who is expressive of his/her Christian faith?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How important are sports/fitness activities to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How important is the neatness of your room to you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "1" was shy and "5" was outgoing, where would you place yourself on the continuum?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On the same continuum, where would you prefer your roommate to be?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What are the most important things to you in a roommate?

Additional Comments

Applicant's Signature

Date

IMPORTANT DATES:

January 9-10, 2006 - New Student Orientation, Spring Semester (classes begin on January 11th)
 August 19-22, 2006 - New Student Orientation, Fall Semester (classes begin on August 23rd)

Send to: Trinity International University
 Undergraduate Admissions Office
 2065 Half Day Road
 Deerfield, IL 60015

Please contact the TIU Student Development Office with questions regarding your housing, orientation dates/events, or other student life questions:

(847)317-7070