

**Profile Matching Application**

Need a roommate? No problem! Here at 515 we know how important it is to find a great roommate. We'll work hard to match you with others who share your interests, lifestyle & habits.

Please begin the process by completing the form below fax it to our leasing office; we will then contact you to review your application.

**Background Information:**

Name: \_\_\_\_\_ Gender: Male Female  
Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)  
School: \_\_\_\_\_ Faculty: \_\_\_\_\_ Year: \_\_\_\_\_  
Major: \_\_\_\_\_ Major/Minor: \_\_\_\_\_  
Hometown: \_\_\_\_\_ Language(s): \_\_\_\_\_

**Contact Information:**

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email: \_\_\_\_\_

**Preferences (Check all that apply and please be honest):**

What type of room would you prefer? (We will do our best to satisfy your preference)  
Girls Only Boys Only Mixed

If you already have roommates you would like to be matched with, please indicate their names below:

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

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INITIALS: \_\_\_\_\_

Are you a smoker? (Note: Smoking is prohibited anywhere in the building)

Yes   Sometimes   No

What are your feelings towards smoking?

Totally against   Indifferent   Acceptable

How would you characterize yourself?

The athlete   The artist   The gamer   The thinker   The couch potato  
The class clown   The preppy   The shy one   The party animal

How would you describe your study habits?

Light studier   Average studier   Heavy studier

Do you consider yourself...?

Very quiet   Quiet   Average   Loud   Very loud

How important is it to you to maintain a clean apartment?

Very important   Somewhat important   Indifferent   Not really important  
Not important at all

What is your definition of a clean apartment?

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What are your feelings with regards to alcohol consumption?

Totally against it   Indifferent   OK on occasion   Totally acceptable

How often do you have friends visit your place or throw parties?

Never   Rarely   Occasionally   Moderately   Often

How do you feel about having guy / girls over for day visit or overnight stays?

Totally against it   Indifferent   OK on occasion   Totally acceptable

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INITIALS: \_\_\_\_\_

Do you have hobbies/pastimes?  
Please list any:

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Do you enjoy cooking for yourself?  
Yes Sometimes No I don't cook

Do you enjoy cooking for others?  
Yes Sometimes No I don't cook

Would you like to split groceries with a roommate?  
Yes Maybe/Depends No

Do you have any special dietary needs or restrictions? Allergies? Preferences?  
Please list any: (i.e. vegan, no peanuts, no red meat, HATE pickles, etc.)

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Are there any additional allergies/health concerns we should know about or that would affect roommate matching? (i.e. asthma) If so, please disclose what you feel is necessary.

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INITIALS: \_\_\_\_\_

Are there any additional concerns, comments, or opinions you have that may affect roommate matching? (i.e. religious views, sexual preferences, vulgarity, etc.)

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**515 STE.CATHERINE WEST INC. HAS THE RIGHT TO REFUSE YOU AS A TENANT IF WE CANNOT APPROPRIATELY MATCH YOU WITH OTHER ROOMMATES OR IF YOU REFUSE THREE ROOMMATES WE PROPOSE TO YOU.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

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INITIALS: \_\_\_\_\_