

Roommate Request Form

Although Longy does not serve as an official roommate referral service for its students, we want to do everything we can to help you get settled in Boston. The Admissions Office would be happy to keep the following information on file for other students who might be looking for roommates. Please note that completing this form is optional and that by submitting it you are permitting us to share this information with other students. Longy has no responsibility for personal problems that may arise from participation in this program.

Name: _____

Phone: _____ Email: _____

Your age: _____

Age range of potential roommate(s): _____

Longy program: Graduate Undergraduate

Instrument/discipline: _____

Would you like your roommate(s) to be in the same program as you?

Yes No No Preference

Gender: Male Female

Gender preference: Male Female No Preference

Do you smoke? Yes No

Smoking preference: Smoking Non-smoking No Preference

Maximum number of people you are willing to live with:

Price range: \$ _____/month to \$ _____/month

By what date do you need an apartment? ____/____/____
mm/ dd / yyyy

Additional comments/preferences: