GROUP OR INDIVIDUAL PERSONALITY PROFILE

MARIST INTERNATIONAL PROGRAMS - FLORENCE

Please print:

Student's name: ____________________________________________________________

Age: ____________________ Gender: F [ ] M [ ]

Directions: The MIP Office places great care into the assignment of program participants to Florence housing. In order to assist us in this process, please complete this survey by indicating your answers in the spaces provided. It is critical that you answer all questions completely and honestly.

Living Environment

_____ Which description best fits the vision of your ideal room?
   A) A place to study and sleep
   B) Some friends visiting some of the time
   C) Lots of people visiting all the time

_____ Choose the answer that best describes your living environment.
   A) Neat and organized
   B) Cluttered and untidy
   C) Varies with how busy my schedule may be

Study Environment

_____ Which description best fits your preferred study environment?
   A) As quiet as possible
   B) Music or other distractions in the background
   C) No preference

_____ When is your preferred time to study?
   A) Morning
   B) Afternoon
   C) Night

Sleeping Habits

_____ Which description best describes your sleeping pattern?
   A) Early Bird
   B) Night Owl
   C) Depends on my schedule

_____ Which description best fits your preferred sleeping environment?
   A) Quiet as possible
   B) White noise in background (television, radio, fan, etc.)
   C) No preference

Lifestyle

_____ Do you smoke?
   A) Yes
   B) No
   C) Occasionally

Please note that all apartments are NON SMOKING
# Marist-LdM Housing & Residential Life - Room Selection Request Form

<table>
<thead>
<tr>
<th>Group Leader's Name</th>
<th>CWID#</th>
<th>Email Address</th>
<th>Phone #</th>
<th>Office Use Only</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>Alternate Group Leader's Name</td>
<td>CWID#</td>
<td>Email Address</td>
<td>Phone #</td>
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<table>
<thead>
<tr>
<th>Bed Room Location</th>
<th>Smoking Preference</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>A (1)</td>
<td>S = Smoker</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>N = Non-Smoker*</td>
<td></td>
</tr>
<tr>
<td>B (2)</td>
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<tr>
<td>B</td>
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</table>

**Request to live with other groups:**

<table>
<thead>
<tr>
<th>Group Leader Name</th>
<th>CWID Number</th>
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</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
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</tbody>
</table>

*All apartments are non-smoking

NOTES:
- Please know that it is **not** possible to request a specific apartment or address.
- Housemate/group preferences will be taken into account but requests may not be possible.