

Roommate Questionnaire

Cleaning/Household chores:

1. How often do you clean your space (mop, vacuum, clean bathroom, etc.)?
2. How often do you wash dishes?
3. If I leave dishes in the sink overnight will that be a problem?
4. Are you open to setting up a chore schedule?
5. If your roommate suddenly is unable to assist in cleaning would you help out more until they are well or until staff is able to secure an alternative plan?
6. If your roommate is not cleaning up after themselves how will you address this situation
 - a. Alone
 - b. With staff support
7. How do you plan to allocate space in the kitchen cabinets and refrigerator?
8. How do you plan to share household expenses such as paper towels, toilet paper?
9. Will you want to share some food items or will you keep food totally separate?

Sleeping and night time issues

1. What time are you usually in bed?
2. Does TV help you fall asleep?
3. Have you ever been told by others that you snore to the point of waking them up?
4. What time do you awaken in the morning?

Home entertainment

1. How often do you watch television?
2. Do you play a musical instrument?
3. Do you plan to listen to music without headphones?
 - a. If so, how often during the day
 - b. At what time of day/night do you mostly listen to music without headphones

Visitors

1. How often do you plan to have visitors during the day?
2. How often do you plan to have overnight visitors?
 - a. Daily
 - b. Weekly
 - c. Bi-weekly
 - d. Monthly
 - e. Hardly ever
 - f. Never

Mutual support and recovery

1. If you notice that your roommate is behaving differently what would you do?
2. Are you in attempting to live a clean and sober lifestyle?
3. If you find your roommate passed out on the couch what would you do?
4. If your roommate or their guests are using drugs in the communal spaces or anywhere within the unit would that be an issue for you?

Smoking

5. Does cigarette or other types of smoke bother you?
6. If your roommate is smoking on the patio outside your window will that be a problem for you?

Service Animals

7. Are you allergic to pet hair?
8. Do you have a fear of animals?
9. Are you comfortable with a roommate that has a Support Animal?
10. If your roommate leaves their Support Animal off leash within the apartment would you be ok with this situation?