

University of Queensland
Housing Preference Form

Institute
for Study
Abroad
BUTLER UNIVERSITY

Full Name: _____ Home University: _____

1) **Gender:** Male Female

2) **Term:** Semester 1 Semester 2 Year

3) **Please select one of the following housing arrangement options:**

I will arrange my own housing.

You do not need to complete the rest of this form. Please return this housing preference form to IFSA-Butler along with a letter from your study abroad advisor on university letterhead stating that your university approves of independent housing.

I would like IFSA-Butler to arrange housing for me.

For more about our available housing options, refer to the housing information included on IFSA-Butler's website.

4) **Please rank the following housing options:**

_____ Urbanest Student Apartments

_____ Emmanuel College* (additional fees \$2,300–\$2,500)

_____ St. John's College * (additional fees approx. \$1,600)

If available, I would prefer:

Single-gender residence Single room Non-smoking Smoking

Select your hooded sweatshirt/t-shirt size (sizes noted are Men's sizes):

X-Small Small Medium Large X- Large XX- Large

Please explain any specific religious or other daily living needs that necessitate particular features and/or considerations in your accommodation or for the IFSA-Butler orientation.

Please list any roommate requests. All requests must be mutual and in writing, but cannot be guaranteed.

If placed in a residential college, how involved would you be in residential college activities (this includes formal dinners, guest speakers, sporting activities, etc.)? Please answer on a scale of 1 to 5, with 1 being "not involved" and 5 being "extremely involved". Explain your answer.

I have read and understand the information on IFSA-Butler's website regarding housing options at the University of Queensland, and I acknowledge that housing preferences are not guaranteed by IFSA-Butler or the University of Queensland. *If placed in a Residential College, I am aware of and prepared to pay the additional supplemental costs. I understand that if I do not disclose any special needs to IFSA-Butler, arrangements cannot be made for me.

Signature: _____ Date: _____