

ADDITIONAL ACCOMMODATION INFORMATION

APPLICANT TO ALSO COMPLETE AND SIGN THIS SECTION/PAGE

Name Email

University/Sending Institution

Are you coming with a partner and/or children Yes No

To help us establish compatible flat/house groupings please list or comment on aspects of your personality or character that you would like us to consider

Anticipated date of arrival

ABOUT YOU – please tick appropriate boxes

	Very Important				Low Importance	
Time spent studying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tolerance of other customs & attitudes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Neatness / Tidy Flat	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Socialising with friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Partying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How do you rate your cooking ability	<input type="radio"/> Above Average	<input type="radio"/> Average	<input type="radio"/> Below Average			
Do you smoke?	<input type="radio"/> Yes	<input type="radio"/> Socially	<input type="radio"/> NO (smoking is prohibited in all University buildings)			

YOU WILL HAVE YOUR OWN BEDROOM – Common areas are shared, so please indicate if you prefer to live in a flat that is:

all male all female mixed

and shared with: 1 2 3 4 5 6 flat / housemates

Do you have any dietary requirements that would influence your flat placement?

The information given on the completed form will be seen by those involved in considering the application. It will also be available to those who may subsequently be entrusted with the applicant's pastoral care. It will not be used for any other purpose.

I certify that the information provided in this application is true and correct and I have disclosed all matters that may be relevant to living in University of Otago accommodation.

Signature of Applicant

Date

RETURN TO:

**Institute For Study Abroad
Butler University
1100 W. 42nd St. Ste #305
Indianapolis, IN 46208**