

Queen's University Summer Program  
Preferences Form



Full Name: \_\_\_\_\_ Major: \_\_\_\_\_

**Gender:** \_\_\_ Male \_\_\_ Female

How did you learn about the Queen's University summer programs? If it was the internet, please specify which website.

\_\_\_\_\_

Do you have areas of particular interest in the field of Irish Studies?

- History                       Politics                       Literature  
 Archaeology                       Film & Drama                       Music  
 Natural Science

**Personal Information**

**You are required to live in housing arranged by the program.** Housing may be near class buildings or located elsewhere in the city. See the housing information section for more information. You are responsible for the cost of any commuting.

Check all the terms that apply to you. We will pass this information along to the host university. While your requests will be taken into consideration, we cannot guarantee your preferences.

- Smoker                                       Non-smoker  
 Allergic to smoke                                       Willing to live with a smoker  
 Prefer coed accommodation                                       Prefer single-sex accommodation  
 Food allergies (please list):

Please explain any specific religious or other daily living needs (e.g., dietary requirements) that necessitate particular features/considerations in your accommodation or for the IFSA-Butler orientation (please explain).

*Not all requests can be accommodated. You may be charged an additional fee if your request is accommodated.*

\_\_\_\_\_

\_\_\_\_\_

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

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I have read and understand the enclosed information regarding the housing for the Queen's University summer program, and I acknowledge that housing preferences are not guaranteed by IFSA-Butler or Queen's University. I understand that if I do not disclose any special needs to IFSA-Butler, arrangements cannot be made for me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_