**ROOMMATE AGREEMENT**

**Point Park University**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Office of Campus Life** |  |  |  |  |  |
|  |  | Building |  | Room/Suite/Apartment |
|  |  |  |  |  |  |
| Roommate Name |  | Roommate Name | |  | Roommate Name |
|  |  |  |  |  |  |
| Roommate Name |  | Roommate Name | |  | Roommate Name |

Explain the compromises you and your roommate(s) have made

regarding the Personal Assessment form in the spaces below

**Sleeping** **Guests**

**Studying** **Security**

**Communication** **Cleaning**

**Personal Property** **Social Life**

When we are not upholding this agreement, we will:

* All University policies and procedures must be followed at all times, regardless of if they are in conflict with this agreement
* In signing this document, we agree to abide by the terms set forth in this document. If in living together, you and your roommate(s) believe pieces of your agreement need to change, see your CF to make an amendment to this document

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Roommate Signature | | Date |  | |  | Roommate Signature | | Date | |  | Roommate Signature | | Date |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Roommate Signature | | Date | | | Roommate Signature | | | Date | | Roommate Signature | | | Date | |
|  |  | | | |  | | |  |  | | | |  |  |
|  |  |  |  |  |  |  |  |  | Date Amended | | | |  |  |
|  | Campus Life Staff Signature | | | | Date | |  |  |  |