

Name: _____

**Duke in Madrid
HOUSING INFORMATION FORM**

Term you are applying for: _____ Fall
(Please check one) _____ Spring
_____ Academic Year

FAMILY HOUSING

Check the appropriate items:

- | | |
|--|--|
| <input type="checkbox"/> I am allergic to smoke. | <input type="checkbox"/> I am allergic to dogs. |
| <input type="checkbox"/> I am intolerant of smoke. | <input type="checkbox"/> I am allergic to birds. |
| <input type="checkbox"/> I am an occasional smoker. | <input type="checkbox"/> I am allergic to cats. |
| <input type="checkbox"/> I have no smoking preference. | |

I do not eat: _____ pork _____ chicken _____ any other meat _____ fish.

Please list any food allergies.

I am agreeable to a double room.

Roommate's Name (must be included):

Please write a brief paragraph about yourself, your interests, and anything you think we need to consider when making your housing assignment. Thank you.

NOTE: We have a large number of good homes. A limited number of them are smoke-free and are normally reserved for students with allergies or absolute intolerance to smoke. Bear in mind that some of the non-smoke-free homes are otherwise excellent.