



# NOTRE DAME OF MARYLAND UNIVERSITY

## Doyle Residential Roommate Contract

Name: \_\_\_\_\_ ID#: \_\_\_\_\_  
Last First

Room #: \_\_\_\_\_ Roommate's Name: \_\_\_\_\_  
Last First

Please take a moment to complete this contract with your roommate(s) and your Resident Advisor. Circle the appropriate response as necessary.

**1. Visitation:** Guests who do not reside in your building must be signed in at the front desk and escorted at all times. Guests staying more than three nights must be approved by your Residence Director. Cohabitation is prohibited.

A. No guests after:

\_\_\_\_\_ (specific time on weekdays)

\_\_\_\_\_ (specific time on weekends)

B. Guests of the opposite gender? yes no

C. Are guests allowed overnight? yes no

D. Can guests use bed? sit on sleep on

E. How much advanced notice for weekend guests?

F. If we want guests to leave, how will we let each other know?

**2. Cleanliness:** Residents are expected to maintain a level of cleanliness of their room for health and safety concerns.

A. The room should be:

clean dirty  
sometimes clean/dirty doesn't matter

B. We will each:

take care of our own half of the room  
alternate cleaning chores  
not clean at all

C. Cleaning means:

sweeping/vacuuming the floors  
dusting  
taking out the trash  
cleaning the refrigerator and microwave

Cleaning schedule:

Mon. \_\_\_\_\_ Tues. \_\_\_\_\_ Wed. \_\_\_\_\_

Thurs. \_\_\_\_\_ Fri. \_\_\_\_\_ Sat. \_\_\_\_\_ Sun. \_\_\_\_\_

(Please initial next to the day(s) that you will be responsible for cleaning).

**3. Noise/Quiet Hours:** Please note that there are designated quiet floors/wings in each residential college with regularly enforced quiet hours.

A. Minimal/respectful noise level after:

\_\_\_\_\_ (specific time during weekdays)

\_\_\_\_\_ (specific time during weekends)

B. Time set aside for sleeping in our room is:

\_\_\_\_\_ (specific time during weekdays)

\_\_\_\_\_ (specific time during weekends)

C. During sleep time:

Lights are on yes no

TV/Music is on yes no

Computer is on yes no

Guests are allowed yes no

**4. Personal Property:** Is it OK for roommates to use?

A. IPOD/MP3 Player/Stereo ask first always never

B. Television/DVD Player ask first always never

C. Movies/CDs ask first always never

D. Cell Phone ask first always never

E. Clothes ask first always never

F. Food ask first always never

G. Furniture ask first always never

H. Appliances ask first always never

I. Bed ask first always never

J. Computer ask first always never

K. Games/Gaming System(s) ask first always never

L. Books/Notes ask first always never

M. Toiletries ask first always never

N. Paying Jointly for Items split the cost  
buy your own

How will we handle damage occurring to other individual's items?

**5. General Concerns:** Please note that it is recommended that the door be kept locked at all times

A. Door(s) will be locked during sleep times:

yes no

B. Door(s) will be locked when we are gone more than 10min:

yes no

C. Door(s) will be locked when we are gone less than 10min.:

yes no

D. Door(s) will be locked when we are home:

yes no

E. Messages will be taken for each other:

yes no

F. Where will messages be posted?: \_\_\_\_\_

G. How late can phone calls be made/received?

\_\_\_\_\_ (specific time during weekdays)

\_\_\_\_\_ (specific time during weekends)

H. Furniture Arrangement:

Discuss with roommate prior to making changes:

yes no

If one of us is having roommate issues, how will we resolve the situation?

**Recommended sequence of options include: 1) discussing issues with roommate(s), 2) asking your Community Assistant (CA) to mediate, and 3) consulting your Graduate Resident Coordinator for assistance 4) consulting your Area Coordinator for assistance.**

As roommates we have discussed these aspects of living together and have agreed upon the details stated above. We agree to act in accordance with this contract and understand that failure to do so may result in reassignment and/or disciplinary action. This agreement may be revisited and/or renegotiated throughout the year as needed.

Roommate Signature \_\_\_\_\_ Date \_\_\_\_\_

Community Assistant Signature	Date
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Roommate Signature \_\_\_\_\_ Date \_\_\_\_\_