COVID-19 Guest Policy Roommate Agreement

Open, honest, and respectful communication is always the key to successfully living with another person. The health concerns related to COVID-19 makes that even more important. We ask that you take a few minutes with your roommate(s) to discuss whether you want to allow for guests in your room or not. If you do decide to allow for guests, please continue to make sure that you and your roommate(s) are all on the same page.

1. Are all roommates ok with having guests in the room?
   □ Yes
   □ No

_All occupants of the room have to agree to have guests. An individual has a right to decide that they are no longer comfortable having guests at any time and all people are expected to respect this. Should you not be able to come to an agreement on what is allowed in the room/area, the person who wants to have guests allowed in the space will be the one expected to move._

2. If yes, who is allowed?
   □ We’re ok with any guests that are approved by SUNY Potsdam’s policy.
   □ We want to restrict guests to only the following agreed upon people:

   _______________________________  _______________________________  _______________________________
   _______________________________  _______________________________  _______________________________

_People in double rooms are allowed 2 people at a time (per room, not per guest); Areas with common rooms (suites, apartments, or Townhouses) are allowed 4 people at a time (per room, not per guest)._  

□ Other (please be specific)

3. How much notice do you want prior to having guests over? (each person should complete this)
   □ I’m open and do not really need notice.
   □ I’d like a text or message, just as a heads up.
   □ I’d like to have at least an hour’s notice.
   □ Other (please be specific)

4. How will you handle it if you both want to have guests at the same time?
   □ We are going to split the number of guests up (2 people can each have one guest, etc) so we never go over our limit.
   □ We are going to create a schedule each day.
   □ We’ll take turns—If person A has guests one day and person B is not able to, then person B can have guests the next day.
   □ Other (please be specific)
5. When guests are in your room, everyone must wear a mask. What other safety precautions do you want taken? (Each person should complete this)

Can guests sit on your bed?  □ Yes  □ No  □ Maybe
Can guests sit at your desk?  □ Yes  □ No  □ Maybe
Can guests touch your belongings?  □ Yes  □ No  □ Maybe

Other and/or Comments: __________________________________________________________
______________________________________________________________________________

6. What are the expectations for cleaning the space once a guest leaves?

______________________________________________________________________________
______________________________________________________________________________

7. Other items that are important to us:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

8. Agreement
By signing this agreement, we are stating that we have spoken about having guests in our room and agree to the procedures outlined on this. We understand that while we are currently in agreement, any of us has the right to decide that we are no longer comfortable having guests. If this happens, the other roommate(s) agree to immediately respect this. Should we like to amend this document we will talk to one another and/or seek out an RA for assistance. Violations of this agreement may result in our room losing permission to have guests and/or other conduct sanctions.

____________________________  ______________________  ______________________
Signature & Date               Signature & Date               Signature & Date

____________________________  ______________________  ______________________
Signature & Date               Signature & Date               Signature & Date

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Signature & Date               Signature & Date