

YOUR CURRENT SITUATION

<p>1. Currently, do you...</p> <p>...Have a checking account?</p> <p>...Have a savings account?</p> <p>...Have a credit card?</p> <p>...Use prepaid debit cards?</p> <p>...Have a retirement savings account (e.g., 401-K)?</p> <p>...Have your savings or investment account set up to automatically put in money at least once a month?</p> <p>...Have money to pay at least three months' expenses set aside in a rainy day fund?.....</p> <p>...Find it difficult to pay any of your loans or debts?</p>	<p>Yes No Unsure</p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/></p>
<p>2. How frequently do you pay your bills <u>after</u> the due date?</p> <p style="text-align: center;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> Almost always Often Sometimes Rarely Never </p>	
<p>3. In the last <u>3 months</u>, how often have you received financial education, information, or advice from an expert in your community?</p> <p style="text-align: center;"> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> Never 1 time 2 times 3 + times Don't Know </p>	
<p>4. In the last <u>3 months</u>, how often have you...</p> <p>... used a check cashing store?.....</p> <p>... taken out a pawn shop loan?</p> <p>...received a call from a creditor or bill collector?</p>	<p>3+ 2 1 Never times times time</p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p> <p><input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/></p>
<p>5. How much do you agree with the following statements? In the last <u>3 months</u>:</p> <p>I was able to save money. <input type="radio"/> Agree a lot <input type="radio"/> Agree a little <input type="radio"/> Disagree a little <input type="radio"/> Disagree a lot</p> <p>I felt in control of my finances. <input type="radio"/> Agree a lot <input type="radio"/> Agree a little <input type="radio"/> Disagree a little <input type="radio"/> Disagree a lot</p> <p>I felt confident that I could handle a financial emergency. <input type="radio"/> Agree a lot <input type="radio"/> Agree a little <input type="radio"/> Disagree a little <input type="radio"/> Disagree a lot</p> <p>I used all of the public benefits and employer benefits I have available to me. <input type="radio"/> Agree a lot <input type="radio"/> Agree a little <input type="radio"/> Disagree a little <input type="radio"/> Disagree a lot</p>	
<p>6. How confident are you that you could find the money within a few days to pay for a financial emergency that costs about \$1000?</p> <p style="text-align: center;"> No Confidence Little Confidence Some Confidence High Confidence <hr/> 1 2 3 4 5 6 7 8 9 10 <input type="radio"/> <input type="radio"/> </p>	

7. How much do you know about the following financial topics?	Nothing					Very Little					Some					A Fair Amount					A Lot				
Loans & Interest Rates	<input type="radio"/>																								
Credit Scores & Reports	<input type="radio"/>																								
Stocks & Bonds	<input type="radio"/>																								
Investing for Retirement	<input type="radio"/>																								

8. Please rate how confident you feel in each of the following areas <u>today</u> with 1 being low confidence and 10 being highly confident.										
	1	2	3	4	5	6	7	8	9	10
Budgeting	<input type="radio"/>									
Debt Management	<input type="radio"/>									
Saving for Future	<input type="radio"/>									
Retirement Plans	<input type="radio"/>									

MANAGING YOUR MONEY

9. Do you currently have a written budget or spending plan?
 Yes No Not sure

10. As of today, how much money do you have in savings (not including any retirement savings you might have)?

<input type="radio"/> \$0	<input type="radio"/> \$1001 to \$2500
<input type="radio"/> \$1 to \$100	<input type="radio"/> More than \$2501
<input type="radio"/> \$101 to \$500	<input type="radio"/> Don't Know
<input type="radio"/> \$501 to \$1000	

11. How much would you guess that you (and your spouse/partner in your household) have in total debt (not including any home mortgage)?

<input type="radio"/> \$0	<input type="radio"/> \$15,001 to \$20,000
<input type="radio"/> \$1 to \$2500	<input type="radio"/> \$20,001 to \$30,000
<input type="radio"/> \$2501 to \$5000	<input type="radio"/> More than \$30,000
<input type="radio"/> \$5001 to \$10,000	<input type="radio"/> Don't Know
<input type="radio"/> \$10,001 to \$15,000	

12. Compared to <u>6 months ago</u> , are you currently...	More	Less	Same
... Saving more, less, or the same amount?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... Earning more, less, or the same amount?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. In the last year, have you requested or downloaded a copy of your own credit report?
 Yes No Not sure

14. As of today, how would you judge your credit rating?

- Very Bad Poor Fair Good Excellent

15. How confident are you that you could fix a problem in your credit report?

- Not at all Confident Slightly Confident Somewhat Confident Very Confident Certain

16. Currently, how much stress do you feel about your financial situation?

- | No Stress | | Low Stress | | | High Stress | | | Overwhelming Stress | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| <input type="radio"/> |

17. How often do you worry about being able to meet normal monthly living expenses?

- | Never | | Rarely | | | Sometimes | | | All the Time | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| <input type="radio"/> |

PLANS FOR YOUR MONEY

18. Currently, do you have at least one *financial* goal?

- Yes No

19. If yes, what is your main *financial* goal?

20. How confident are you that you will reach this financial goal in the next year?

- Not at all Confident A little Confident Somewhat Confident Very Confident Certain

21. Are you interested in working with a free *financial coach* who can help you set and reach your own financial goals?

- Yes No Not sure

ABOUT YOU

1. **What is your age?** 14-16 17-18 19-20 21-22

2. **Are you married?** Yes No

3. **What is your gender?** Male Female

4. **How many children do you have at your home under age 18?**

- None
- One
- Two
- Three
- Four or more

5. **Which best describes you?**

- White
- Black or African American
- Latino or Hispanic
- Asian or Pacific Islander
- Native American
- Other

6. **What is the highest level of education you have completed?**

- Less than high school
- High school or equivalent (HSED/GED)
- Some college or Associates (2 year) degree
- 4 Year college degree or more

7. **Which best describes your housing?**

- Own
- Rent
- Other

8. **Thinking about last month, which comes closest to your total take-home income from all sources?** (include job, child support, unemployment, or side jobs, after taxes are taken out, and SSA benefits)

- Less than \$400
- \$401-\$800
- \$801-\$1200
- \$1201-\$1600
- \$1601-\$2000
- \$2001-\$2400
- \$2401-\$2800
- \$2801-\$3200
- More than \$3200
- Not sure

PAY DAY LOANS

1. **Do you currently have a Pay Day Loan?** Yes No
2. **Do you know your current interest rate(s)?** Yes No
3. **If so, what is it?** _____
4. **How many Pay Day loans do you have?** 1 2 3 4 or more
5. **Are all those loans with the same loan company?** Yes No
6. **Have you used a car, home or other as collateral on a Pay day loan?** Yes No
7. **How much debt in pay-day loans do you have overall?** _____

If you are a client of the Department of Rehabilitation Services (DRS), submit a completed copy of this document to your Vocational Rehabilitation Specialist.