

FINANCIAL EDUCATION NEEDS ASSESSMENT

[Your organization's name]

is exploring providing more financial education for our
[employees/team members/plan participants].

By answering these questions, you will help us determine the kinds of programs you want. You will also find ideas that can inspire you on your financial journey.*

Financial Management

1. I have a bank or credit union account that I use to pay bills.
 Yes No
2. I have enough money each month to pay my rent/mortgage and other expenses.
 Always Usually Sometimes Seldom Never
3. I have enough money to pay for an unexpected bill such as a car or home repair.
 Always Usually Sometimes Seldom Never
4. I have at least three months' income set aside in a readily accessible account (e.g., savings account, money market mutual fund) that I can use if I am temporarily unable to work.
 Always Usually Sometimes Seldom Never
5. I have a written budget for my spending and saving.
 Yes No
6. I stay within my budget.
 Always Usually Sometimes Seldom Never

Savings and Investing

7. When I want to make a big purchase such as the down payment on a house or pay for my children's education, I investigate how much I will need and create a plan for saving the money.
 Always Usually Sometimes Seldom Never
8. I save regularly for long-term financial goals (e.g., education for my children, a house, retirement).
 Yes No
9. I know how much I have to save for my retirement.
 Yes, I know exactly what I must save.
 I have a general idea of what I should save.
 No, I have no idea what I should save.

*All responses will be kept completely confidential—you will not be asked to give your name as part of this survey.

Savings and Investing *(Cont.)*

10. I spread my retirement savings across more than one type of investment (e.g., stocks, bonds, mutual funds, CDs).
 Yes No I don't have any retirement savings.
11. I have my retirement savings in investments that are appropriate for my personal circumstances (e.g., my age, comfort with risk).
 Yes No I don't have any retirement savings.
12. I increase my savings when I receive a salary increase.
 Always Usually Sometimes Seldom Never

Credit

13. I feel stressed about the amount of money I own on student loans, credit cards and car payments.
 Yes No
14. I pay credit card bills in full to avoid interest charges.
 Always Usually Sometimes Seldom Never I don't have a credit card.

Shopping

15. I avoid buying things on impulse that aren't part of my spending plan.
 Always Usually Sometimes Seldom Never

Insurance and Estate Planning

16. I have enough health insurance and money saved to cover any large unexpected medical expenses for both me and my family.
 Yes No I don't know.
17. I have enough sick leave and/or disability insurance to cover me if I become ill or injured and can't work.
 Yes No I don't know.
18. If I die, I have enough life insurance for family members who now or in the future need my financial support.
 Yes No I don't know. I have no one who needs my help.
19. I have enough homeowner's or renter's insurance if my home or personal property is lost or damaged by a fire, flood, theft, etc.
 Yes No I don't know. I don't rent or own my home.
20. I have prepared documents that give my family and health care providers instructions for my health care if I am unable to tell them what I want and don't want.
 Yes No I don't know.
21. I have a will or a living trust that is up-to-date.
 Yes No I don't know.
22. I have designated a health care power of attorney.
 Yes No I don't know.

General

23. This statement best describes my financial situation.

I have enough money to enjoy life.

I am getting by.

My finances control my life.

You and Your Preferences

24. What financial topics are you most interested in learning more about? (Check all that apply—or indicate top three-five.)

Budgeting

Organizing and storing important records

Getting and using credit

Dealing with student loans or other debt

Buying a car, truck or other vehicle

Homeownership

Paying for education (prefunding)

Giving to charity

Having or adopting a child

Health insurance

Life insurance

Disability insurance

Saving and investing

Retirement planning

Long-term care planning

Dealing with a terminal illness

Estate planning

Protecting your identity

How to choose professionals
(e.g., doctors, lawyers, financial advisors)

Talking with your partner about money

Teaching kids about money

Supporting elderly parents/relatives

Supporting adult children

Filing your taxes and tax breaks

Bankruptcy

Divorce

Social Security/CPP/QPP

Medicare

Other _____

25. How would you like to have financial information and education delivered to you? (Check all that apply.)

Group seminars and workshops

Videos

One-on-one financial counseling

Print materials (e.g., brochures, booklets)

Website resources

Online (e-learning) courses

E-mail

Text messages

Social media

Mobile apps

Other _____

26. When would you prefer in-person programs? (Check all that apply.)

Mornings (before work)

Lunchtime

Evenings (after work)

Weekends

Other _____

27. What is your gender?

Male

Female

Prefer to self-describe (fill in)

Prefer not to say

You and Your Preferences *(Cont.)*

28. How old are you?

Under 25

25-34

35-44

45-54

55-64

65 or older

29. Which of the following persons do you have in your household?

Your spouse or partner

Children

Your parent(s) or other adult family members

Other _____

30. How much does your household earn?

Less than \$25,000

\$25,000 to \$49,999

\$50,000 to \$74,999

\$75,000 to \$99,999

\$100,000 or more

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