

Personal Financial Self-Assessment Questionnaire

Please complete this short questionnaire to help us better understand your financial situation. Your responses will remain confidential and are intended to provide a general overview of your financial well-being.

Income and Expenses

1. What are your primary sources of income?
(e.g., employment, investments, social security, other)
Answer:

 2. Is your monthly income generally stable and predictable?
 Yes
 No
 Somewhat
 3. Do your monthly expenses typically stay within your income?
 Yes
 No
 Sometimes
 4. How do you primarily track your income and expenses?
 Budgeting app
 Spreadsheet
 Manually
 I don't currently track them
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Savings and Debt

5. Do you currently have savings set aside for emergencies?
 Yes
 No
6. Approximately how many months of living expenses could your savings cover?
 Less than 1 month
 1-3 months
 More than 3 months
7. Do you have outstanding debts? If yes, what types?
(e.g., credit cards, student loans, car loans, mortgage, other)
Answer:

8. Can you make at least the minimum monthly payments on all your debts?
- Yes
 - No
9. Have you used any credit or borrowed money to cover essential expenses in the past year?
- Yes
 - No

General Financial Health

10. How confident are you in your ability to manage your finances?
- Very confident
 - Somewhat confident
 - Not confident
11. Have you reviewed your credit score or credit report within the past year?
- Yes
 - No
12. Do you want to share anything about your financial situation?
- Answer:**