



INDIVIDUAL SURVEY

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Name: _____

Address: _____ Phone #: _____

Current role/occupation: _____ Alt. phone #: _____

Family status: Single Married Divorced Separated Widowed

Number of children: _____ Age: _____

Spouse's Name: _____ Spouse's occupation: _____



1.0 FINANCIAL ADVISING

1.1 Do you have a financial advisor who meets with you on a regular basis?

___ Yes ___ No

1.1.1 If Yes, what do you like about what your advisor does for you?

1.1.2 Is there anything they do that you dislike?

1.2 Do you feel your current financial plan could be improved?

___ Yes ___ No

1.2.1 If Yes, what are your concerns?

2.0 COLLEGE FUNDING AND RETIREMENT

2.1 Is college funding for children or grandchildren important to you?

___ Yes ___ No

2.2 Are you ahead of schedule for your retirement goals?

___ Yes ___ No



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2.3 Where will your income come from at retirement?

2.4 Do you regularly update your retirement plan?

Yes No

2.5 Do you have any individual retirement accounts?

2.6 Do you have a retirement account with your employer?

Yes No

2.6.1 If Yes, do you know who handles the plan within the company?

Yes No

2.6.2 Do you have anyone advising you on your corporate retirement account (if you have one)?

Yes No

2.7 Do you maintain any retirement accounts from former employers?

Yes No

3.0 HEALTH INSURANCE

3.1 Is your health insurance plan through your employer?

Yes No

3.2 Do you have a say in what insurance plan your company maintains?

Yes No



4.0 LONG TERM CARE/DISABILITY

4.1 Are you concerned about losing assets in the event of a long-term nursing home stay or disability?

___ Yes ___ No

4.2 Do you have any protection plans in place for such events?

___ Yes ___ No

5.0 LIFE INSURANCE

5.1 How much life insurance do you own?

5.2 How much is term? How much is permanent?

5.3 What companies did you purchase the policies from?

5.4 When was the last time you reviewed or updated your life insurance?



6.0 LEGAL DOCUMENTS

6.1 When was the last time your legal documents (wills, trusts, etc.) were updated? Is this a concern for you?

7.0 IMPORTANCE SCALE

6.1 On a scale from 1 to 5 (1 being NOT IMPORTANT and 5 being VERY IMPORTANT), how would you rate the following financial areas?

	Not Important				Very Important
	1	2	3	4	5
College Funding					
Retirement					
Wealth Accumulation					
Insurance Protection					
Estate Planning					

8.0 SURVEY REFERRALS

8.1 Do you know 3-4 other people who would be willing to take this survey?

Name	Occupation	Address	Phone #
1.			
2.			
3.			
4.			



9.0 ADDITIONAL QUESTIONS

9.1 Do you have additional questions?
