UNIVERSITY OF WISCONSIN-MADISON Research Participant Information and Consent Form

Title of the Study: Evaluation of Financial Coaching volunteer services

Principal Investigator: J. Michael Collins (phone: 608-262-0369) (email: jmcollins@wisc.edu)

Student Researcher: Jing Wang (phone: 608-261-5077) (email:jwang68@wisc.edu)

DESCRIPTION OF THE RESEARCH

You are invited to participate in a research study about how setting financial goals and having support to achieve them can improve financial behavior. You have been asked to participate because you are client of Financial Education Center and may benefit from having support to achieve a short term goal. The purpose of the research is to discover if setting goals and having a financial coach may improve financial outcomes. This study will include only people between 18 and 65 years of age. You will be asked to complete one survey today and another in about 6-7 months

WHAT WILL MY PARTICIPATION INVOLVE?

If you decide to participate in this research project, you will be asked to complete one survey today and another in about 6-7 months. We don't expect any risks to you if you help out in this study.

If you complete both surveys, you will have two chances to win a \$100 gift cash card.

Your name will not be used in any reports based on this research project. Any information you share in this survey will be combined with all the other surveys received, so that only group information will be shared.

You may ask any questions about the research at any time. If you have questions about this project after today, you should contact Michael Collins at 608-262-0369 or Jing Wang at 608-261-5077. If you are not happy with the response from Michael or Jing, have more questions, or want to talk with someone about your rights as a research participant, you should contact Greg Hutchins at 608-262-4387.

Your participation is completely voluntary. If you decide not to join in or want to withdraw from the study it will have no effect on any services you are currently receiving.

Your signature means that you have read this consent form, had a chance to ask any questions about your participation in this research project, and voluntarily agree to participate. You can receive a copy of this form for your records if you would like one.

Name (please print):		
Signature:		
Date:	_	

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Financial Coaching Participant Survey

Thank you for completing this survey. Doing so is voluntary. Your answers have no effect on any services or treatment you are currently receiving.. In order to conduct a follow-up survey we will ask for your contact information. This information will not be retained for any reason other than the follow up survey.

1.	Do you have a	checking or savings	account? [] No	[] Only Savings []	Only Checkin	ng [] Both
	How often did y Never [] 1 ti		hing outlet in the last [] 3 times [] 4 ti		[] 6 times or	more
3.	Do you have a i	retirement savings/i	nvestment account?	[]	Yes [] No	[] Not Sure
4.	Have you ever	ordered your credit	eport?		Yes [] No	
5.	Which best des	cribes you				
	[] I don't have	a credit card				
	[] I have a cred	lit card and always	pay off the balance			
	[] I have a cred	it card and usually	pay off some of the	balance		
	[] I have a cred	lit card and usually	pay only the minim	um payment		
6.	In last 6 weeks,	have you paid a la	0	Yes [] No		
7.	Do you track yo	our monthly expens		Yes [] No		
8.	Do you have a r	<u> </u>	dget or spending pla - But do not stick to		ot Sure	
9.			ve for you or your fa - But do not follow		Sure	
10.	How much do y	ou agree with the f	Collowing statements	? In the last six weel	ks:	
I aı	m able to save mo	oney				
	[] Agree a lot	[] Agree a little	[] Disagree a lot	[] Disagree a little	[] Don't k	now
I sa	ive regularly for l	long-term financial	goals, such as educa	ation for children, ho	ouse or retiren	nent
	[] Agree a lot	[] Agree a little	[] Disagree a lot	[] Disagree a little	[] Don't k	now
I h	ave at least three	months expenses so	et aside in a reality a	ccessible account		
	[] Agree a lot	[] Agree a little	[] Disagree a lot	[] Disagree a little	[] Don't k	now
I fe	eel in control of n	ny finances				
	[] Agree a lot	[] Agree a little	[] Disagree a lot	[] Disagree a lttle	[] Don't k	now
I aı	m comfortable of	fering financial adv	vice to others.			
	[] Agree a lot	[] Agree a little	[] Disagree a lot	[] Disagree a little	[] Don't k	now

C 2

Goal Setting Form

Health Benefits O

O

Debt

Rate your current financial status with 0 being poor and in the middle and 10 being high and at the outside of the circle. 1 2 3 4 5 6 7 8 9 10 Savings O \mathbf{O} O O O O O O O O Credit O O O O O O O O O O Insurance O O O O O O O O O O Retirement O O O O O O O O O O Budgeting O O O O O O O O O O Banking O O O O O O O O O O

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1.	Which	area do	you	want	to	improv	e?
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- [] Savings [] Credit [] Insurance [] Retirement
- [] Budgeting [] Banking [] Health Benefits [] Debt
- 2. What financial goal could you set for that area in next six weeks?

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My goal is...

3. What could you do in the next 6 weeks to make progress towards that goal?

I will...

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About You

1.	What is your age?	[]18-35	[] 36-45] 46-55 []	5664	[] 65 or o	older	
2.	Which best describes	s you?	[] White [] Native A					
3.	What is the highest l	evel of ed	ucation you	have comp	oleted?			
	[] Less than high sch	nool	[] High sch	ool or GEl	D	[] Trade s	chool	
	[] 2-year college or a	associates	degree [] 4-year co	llege	[] Gradua	te degree	
4.	What is your gender	? [] Mal	e [] Fen	nale				
5.	Are you married?	[] Yes	[] No					
6.	How many children	do you ha	ve? [] Nor	ne [] One	[] Tw	o [] Thre	ee or more	e
7.	How much would yo mortgages)?	ou estimat	e you and yo	our spouse/	partner l	have in tot	al debts (exclude all
[]\$	0 (None) [] \$1-\$1,	500	[] \$1,501 to	\$3,000	[] \$3	,001 to \$4	,500	[] \$4,501 to \$6,000
[] \$	6,001 to \$7,500	[] \$7,501	to \$10,000	[]	More th	nan \$10,00	0	[] Don't know
8.	How much would yo	ou estimat	e you and yo	our spouse/	/partner l	have in tot	al savings	s?
[] 9	\$0 (None) [] \$1-\$1,5	500	[] \$1,501 to	\$3,000	[] \$3	,001 to \$4	,500	[] \$4,501 to \$6,000
П	\$6.001 to \$7.500	П \$7.501	to \$10,000	Π	More th	nan \$10.00	0	∏ Don't know

4

Contact Information

Name:			
Home Phone:			
Cell Phone:			
Email: _			
Which number is best to contact you:	[] Phone	[] Email	[] Mail
Street:			
City/State/Zip:			

* Mailing address will be used for delivering follow-up survey and winning gift.