

Financial Capability Scale (0-8 point scale)

1. Do you **currently** have a personal budget, spending plan, or financial plan?
 - ◇ Yes (1 point)
 - ◇ No (0 points)
2. How **confident** are you in your ability to achieve a financial goal you set for yourself today?
 - ◇ Not at all confident (0)
 - ◇ Somewhat confident (1)
 - ◇ Very confident (2)
3. If you had an unexpected expense or someone in your family lost a job, got sick or had another emergency, how **confident** are you that your family could come up with money to make ends meet within a month?
 - ◇ Not at all confident (0)
 - ◇ Somewhat confident (1)
 - ◇ Very confident (2)
4. Do you **currently** have an automatic deposit or electronic transfer set up to put money away for a future use (such as savings) ?
 - ◇ Yes (1 point)
 - ◇ No (0 points)
5. Over the **past month**, would you say your family's spending on living expenses was **less than** its total income?
 - ◇ (Yes (1 point)
 - ◇ No (0 points)
6. In the **last 2 months**, have you been charged a late fee on a loan or bill?
 - ◇ Yes (0 point)
 - ◇ No (1 points)

The following are recommended questions (non-scale).

- A1. How would **you** rate your **current** credit record?
- ◇ Very bad
 - ◇ Bad
 - ◇ About average
 - ◇ Good
 - ◇ Very good
- A2. Do you **currently** have at least one financial goal?
- ◇ Yes
 - ◇ No