

What Do You Know? – Money Smart for Older Adults

OMB No. 3170-0024

Expires: 12/31/2016

Instructor: _____ Date: _____

This form will allow you and the instructors to see what you know about protecting your finances both before and after the training. Read each statement below. Please circle the number that shows how much you agree with each statement.

	Before the Training				After the Training			
	Strongly Disagree	Disagree	Agree	Strongly Agree	Strongly Disagree	Disagree	Agree	Strongly Agree
I am better able to:								
1. Recognize and reduce the risk of elder financial exploitation.	1	2	3	4	1	2	3	4
2. Guard against identity theft.	1	2	3	4	1	2	3	4
3. Plan for unexpected loss of the ability to manage my finances.	1	2	3	4	1	2	3	4
4. Prepare financially for disasters.	1	2	3	4	1	2	3	4
5. Find other helpful resources for managing my money.	1	2	3	4	1	2	3	4

Evaluation Form

This evaluation will enable you to assess your observations of the *Money Smart for Older Adults* module. Please indicate the degree to which you agree with each statement by circling the appropriate number.

1. Overall, I felt the module was: <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
2. I achieved the training objectives.	1	2	3	4	5
3. The instructions were clear and easy to follow.	1	2	3	4	5
4. The slides were clear.	1	2	3	4	5
5. The slides enhanced my learning.	1	2	3	4	5
6. The time allocation was correct for this module.	1	2	3	4	5
7. The module included sufficient examples and exercises so that I will be able to apply these new skills.	1	2	3	4	5
8. The instructor was knowledgeable and well-prepared.	1	2	3	4	5
9. The worksheets are valuable.	1	2	3	4	5
10. I will use the worksheets again.	1	2	3	4	5
11. The participants had ample opportunity to exchange experiences and ideas.	1	2	3	4	5
12. My knowledge/skill level of the subject matter before taking the module.	None				
13. My knowledge/skill level of the subject matter upon completion of the module.	Advanced				
	1	2	3	4	5

<p>14. Name of Instructor:</p> <p>Instructor Rating:</p> <p>Please use the response scale and circle the appropriate number.</p>	<p>Response Scale:</p> <p>5 Excellent</p> <p>4 Very Good</p> <p>3 Good</p> <p>2 Fair</p> <p>1 Poor</p>					
Objectives were clear & attainable	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> </table>	1	2	3	4	5
1	2	3	4	5		
Made the subject understandable	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> </table>	1	2	3	4	5
1	2	3	4	5		
Encouraged questions	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> </table>	1	2	3	4	5
1	2	3	4	5		
Had technical knowledge	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> </table>	1	2	3	4	5
1	2	3	4	5		

What was the most useful part of the training?

What was the least useful part of the training and how could it be improved?

Paperwork Reduction Act

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 3170-0024. The time required to complete this information collection is estimated to average approximately 5 minutes per response, including the time for reviewing any instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Responding to this collection of information is voluntary. Comments regarding this collection of information, including the estimated response time, suggestions for improving the usefulness of the information, or suggestions for reducing the burden to respond to this collection should be submitted to Bureau at the Consumer Financial Protection Bureau (Attention: PRA Office), 1700 G Street NW, Washington, DC 20552, or by email to PRA@cfpb.gov.