

**How well do the following statements describe you?**

**When you think about the last few years...**

1. I could handle a major unexpected expense.

- Never
- Rarely
- Sometimes
- Often
- Always

2. I am securing my financial future.

- Never
- Rarely
- Sometimes
- Often
- Always

3. Because of my money situation, I feel like I will have the things I want in life.

- Never
- Rarely
- Sometimes
- Often
- Always

4. I can enjoy life, because of the way I am managing my money.

- Never
- Rarely
- Sometimes
- Often
- Always

5. I am getting by financially.

- Never
- Rarely
- Sometimes
- Often
- Always

6. I am confident that the money I have saved will last.

- Never
- Rarely
- Sometimes
- Often
- Always

7. I would be able to afford a gift for a wedding, birthday, or other occasion.

- Never
- Rarely
- Sometimes
- Often
- Always

8. I have money leftover at the end of the month.

- Never
- Rarely
- Sometimes
- Often
- Always

9. I am ahead on my finances.

- Never
- Rarely
- Sometimes
- Often
- Always

10. I am in control of my finances.

- Never
- Rarely
- Sometimes
- Often
- Always

11. How old are you?

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55 & older

12. What County do you live in?

13. What program(s) are you enrolled in?

\*check all that apply

- Capitol YouthBuild
- Career Pathways
- Community Rehabilitation Program
- Employment For Independent Living Program
- National Dislocated Workers Grant
- Work Based Learning Services/OJT
- One Stop
- Ticket to Work
- YouthReady

14. Please enter your full name

\* 15. Have you ever used a cash app or had your employment pay put on a debit card?

Yes

No

16. If you answered yes to question 15, which one have you used?

Cash App

Square Cash

Venmo

Other

PayPal

\* 17. Which type of transportation have you used to get to and from employment? (check all that apply)

Personal Vehicle

Placement facility

Friend or Family member

Uber/Lyft

Public transportation (bus)

Other

**Now please think about the current COVID-19 situation, and respond to the next set of questions about how it might be affecting you financially.**

18. How has COVID-19 affected you financially?

- Not at all
- Somewhat
- Significantly

19. Has COVID-19 impacted any of the following?

\*check all that apply

- Was laid off from work
- Prolonged my job search efforts
- Decreased my work hours
- Increased my work hours
- Altered my work environment
- It has not affected me

20. Are you currently:

- Employed full-time
- Employed part-time
- Unemployed receiving unemployment benefits
- Unemployed receiving no unemployment benefits
- Full-time student
- Part-time student

21. Do you have internet?

- Yes
- No

22. If you would like information or resources regarding COVID-19, finances, and employment opportunities, please list your name, an email address, and a phone number below.

<b>Name</b>	<input type="text"/>
<b>Email Address</b>	<input type="text"/>
<b>Phone Number</b>	<input type="text"/>

