OMB Control Number: 3170-0038

Expiration Date: 2/28/2017

Post-Training Survey for *Your Money, Your Goals*

For completion by training participants at the beginning of a *Your Money, Your Goals* training. Return this survey to your trainer.

Thank you for completing this survey. This information is being collected to help the Consumer Financial Protection Bureau to track usage of the Your Money, Your Goals materials. Complete this survey providing short written responses and selecting from response options, as prompted by the survey questions. Please note that your responses will be kept private to the extent permitted by law and when survey results are reported none of your answers will be directly connected to you. Please see the Paperwork Reduction Act statement and Privacy Notice on the last page of this survey.

1) **Which organization organized this delivery of *Your Money, Your Goals?***

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2) **Which of the Consumer Financial Protection Bureau's (CFPB) 2016 *Your Money, Your Goals* partners organized the larger training initiative of which this delivery is a part?**

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3) **Which version of the toolkit was used for your training? (See the subtitle on your copy of the toolkit.)**

- ❑ Social Services Programs
- ❑ Volunteers
- ❑ Workers
- ❑ Legal Aid

4) **Please indicate the extent to which you agree or disagree with each of the following statements. If you disagree with any of the statements, please explain below.**

	Strongly Agree	**Agree**	**Disagree**	**Strongly Disagree**
The training was effective.	○	○	○	○
Your Money, Your Goals will improve my ability to meet the needs of my clients.	○	○	○	○
I feel prepared to use the tools and resources in the Financial Empowerment Training toolkit with clients.	○	○	○	○
I plan to use the tools and resources in *Your Money, Your Goals* with clients.	○	○	○	○

5) How confident are you in your ability to…

	Very Confident	Confident	Somewhat Confident	Not at All Confident
Understand core financial management topics, such as budgeting, saving, and setting financial goals?	○	○	○	○
Discuss core financial management topics with your clients?	○	○	○	○
Assess your clients' financial condition or situation?	○	○	○	○
Get help if you or your clients have questions about financial issues?	○	○	○	○
Refer clients to community resources such as credit-debt counseling and tax filing assistance?	○	○	○	○
Know where to go for unbiased information or help in working with clients?	○	○	○	○
Help clients manage their financial challenges?	○	○	○	○
Provide the right financial content at the right time in the context of your work with clients?	○	○	○	○
Access and use tools and materials from the Consumer Financial Protection Bureau (CFPB) through its consumer website?	○	○	○	○

Privacy Notice

Information you provide in response to this survey will help the survey sponsor the Consumer Financial Protection Bureau ("CFPB") evaluate the effectiveness of the *Your Money, Your Goals* toolkit, and to assess the scope of partner organizations' use of the toolkit.

The CFPB will not obtain or access any information that directly identifies respondents, and any answers or comments you provide will not be tied to you individually. The agency will only obtain and access de-identified results and aggregated analyses of those results. Any directly identifying information will only be used by ICF International (survey facilitator) and partner organizations to facilitate distribution and collection of surveys and survey responses. Survey responses will not be shared and will be kept private except as required by law.

This collection of information is authorized by Pub. L. No. 111-203, Title X, Sections 1013 and 1022, codified at 12 U.S.C. §§ 5493 and 5512.

Your participation is voluntary, and you may withdraw participation at any time.