

Pre-session Questionnaire

Participant ID (optional): _____

1. How confident are you in your knowledge of budgeting?

(Please circle one)

Very Unconfident / Unconfident / Neutral / Confident / Very Confident

2. What is a budget?

3. Can you name two examples of expenses you have?

4. Do you currently track your spending?

☐ Yes

☐ No

5. What would you like to learn in today's session?