

Survey before the workshops

Date: _____ Organization: _____

Help us make our program better. Your answers on this survey will help us understand where we're making a difference and how we can do better. Answer only the questions you're comfortable with. We'll keep your answers private.

Name or nickname: _____

City or town you live in: _____

1. Your gender identity:

- Man Non-binary Other: _____
 Woman Two-spirit Prefer not to say

2. Your age:

- Under 21 21 to 30 31 to 40 41 to 50 51 to 60 Over 60

3. Your first language:

- French English Other: _____

4. What is your highest level of education?

- Elementary or junior high school CEGEP (Quebec) University
 High school College Prefer not to say

5. Check all groups that you identify as a member of:

- | | |
|---|---|
| <input type="checkbox"/> Member of a visible minority group in Canada (non-white) | <input type="checkbox"/> First Nations urban (non-affiliated) |
| <input type="checkbox"/> Newcomer to Canada | <input type="checkbox"/> Inuit |
| <input type="checkbox"/> Refugee | <input type="checkbox"/> Métis |
| <input type="checkbox"/> First Nations on reserve | <input type="checkbox"/> Person with a disability |
| <input type="checkbox"/> First Nations off reserve | <input type="checkbox"/> Prefer not to say |
| | <input type="checkbox"/> Other _____ |

6. Circle a number to show how much you agree with the following statements:

Completely Disagree ←————→ Completely Agree

I feel confident managing my money	1	2	3	4	5
I feel that I can improve my financial situation	1	2	3	4	5

7. Check what applies to you:

- I have a plan for saving money
- I have a chequing account
- I have a savings account
- I have a Registered Education Savings Plan (RESP)