



This information is used to serve you more effectively, and to help us understand where you are starting. To learn more, please see a SparkPoint staff member. All information you provide on this form will be kept confidential.

First Name: _____ Last Name: _____

SAVINGS AND ASSETS INFORMATION

Do you have any of the following accounts?

(Please check all that apply)

Table with 2 columns: Account type (e.g., Checking, Cash savings, Prepaid debit card, Savings, Stipend, IDA, Retirement Account, Investments, Education Fund, All Other) and Total Balance (\$ _____)

Do you own a vehicle?

Yes No Estimated value \$ _____

Do you own a home?

Yes No Estimated value \$ _____

Total Savings \$ _____

DEBT INFORMATION

Please check all that apply. Then list the balance and minimum monthly payments due.

Table with 3 columns: Debt type (e.g., Credit Card Debt, Personal Loan, Student Loans, Mortgage, Vehicle Loan, Medical Debt, Back Taxes, Payday Lender, Utilities Debt, Child Support Owed, Collections Debt, All Other Debt), Total Balance (\$ _____), and Minimum Monthly Payment Due (\$ _____)

Total Debt \$ _____

AVERAGE MONTHLY EXPENSES

Please fill in your monthly expenses for all fields. If you do not have expenses in that area, write 0.

1. HOUSING AND UTILITIES

Rent \$ _____
 Phone \$ _____
 Electricity/Gas \$ _____
 Water/Sewer \$ _____
 Cable/Internet \$ _____
 Garbage/Waste Removal \$ _____
 Maintenance and Repairs \$ _____
 Home/Renters Insurance \$ _____
 All Other Housing Costs \$ _____
 Subtotal \$ _____

2. FOOD

Groceries \$ _____
 Dining Out \$ _____
 Subtotal \$ _____

3. TRANSPORTATION

Public Transportation/Taxi \$ _____
 Auto Insurance \$ _____
 Car Share or Rental \$ _____
 Fuel \$ _____
 Maintenance \$ _____
 Subtotal \$ _____

4. MEDICAL/DENTAL COSTS

Prescriptions \$ _____
 Health Insurance \$ _____
 Out of Pocket \$ _____
 Subtotal \$ _____

5. EDUCATION

Are you or your spouse in school? Yes No
 Monthly Fees & Tuition \$ _____
 Monthly School Supplies \$ _____
 Subtotal \$ _____

6. CHILDREN

Child Care \$ _____
 Children School Tuition \$ _____
 Children School Supplies \$ _____
 Children Clothing \$ _____
 Children Toys/Games \$ _____
 Child Support Cost \$ _____
 All Children Other Costs \$ _____
 Subtotal \$ _____

7. OTHER EXPENSES

Legal \$ _____
 Donations \$ _____
 Pet Costs \$ _____
 Entertainment \$ _____
 Personal Care Cost (clothing, hair) \$ _____
 Remittance (money you send home) \$ _____
 Miscellaneous Costs \$ _____
 Subtotal \$ _____

8. TAXES PAID MONTHLY (FROM PAY STUB)

Federal taxes \$ _____
 State taxes \$ _____
 Local taxes \$ _____
 Social Security \$ _____
 Subtotal \$ _____

Sum of Expenses Subtotals \$ _____

Total Min Monthly Payments \$ _____

Total Expenses \$ _____

CREDIT SCORE INFORMATION (OPTIONAL)

Do you know your credit score from Equifax? (FICO score)

Yes, score is _____ I don't have enough credit history to have a score I don't know my score

Do you know your credit score from Experian? (FICO score)

Yes, score is _____ I don't have enough credit history to have a score I don't know my score

Do you know your credit score from TransUnion? (FICO score)

Yes, score is _____ I don't have enough credit history to have a score I don't know my score

For Sparkpoint Staff Only: Initials _____ Date _____