**Ozaukee County Financial Coach Participant Closure Form**

Completed by Volunteer Financial Coach

(Please return: Carol Bralich, UW-Extension, 121 W. Main St., P.O. Box 994, Port Washington, WI 53074, carol.bralich@ces.uwex.edu)

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| --- | --- | --- | --- | --- | --- | --- |
| Name of Individual / Family | | |  | | | |
| Volunteer Name | |  | | | | |
| Date Started |  | | |  | Date Ended |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Topics Covered During Financial Coaching: (check all that apply)** | | | | | | | | | | | | | |
| ☐ | Consumer credit management | | | | | | | | | | | | |
| ☐ | Debt repayment strategies | | | | | | | | | | | | |
| ☐ | Keeping track of expenses | | | | | | | | | | | | |
| ☐ | Goal-setting/tracking | | | | | | | | | | | | |
| ☐ | Developing a spending plan | | | | | | | | | | | | |
| ☐ | Bill paying strategies | | | | | | | | | | | | |
| ☐ | Referral to other agencies | | | | | | | | | | | | |
| ☐ | Others, please list: | | | | | |  | | | | | | |
| **Log of Conferences with Individual / Family** | | | | | | | | | | | | |
| Date Scheduled | | Attended | | | | | | Time w/client | Location of in person meeting | Phone | E-Mail | Comments |
|  | | ☐ | yes | ☐ | no | | |  |  | ☐ | ☐ |  |
|  | | ☐ | yes | ☐ | | no | |  |  | ☐ | ☐ |  |
|  | | ☐ | yes | ☐ | | no | |  |  | ☐ | ☐ |  |
|  | | ☐ | yes | ☐ | | no | |  |  | ☐ | ☐ |  |
|  | | ☐ | yes | ☐ | | no | |  |  | ☐ | ☐ |  |

|  |  |
| --- | --- |
| Total Hours |  |

|  |
| --- |
| **Printed Resources / Materials Used / Shared: (please list)** |
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| **Referrals Made:** |
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| --- | --- |
| **Summarize Actions Taken by Family / Individual: (check all that apply)** | |
| ☐ | Developed spending plan |
| ☐ | Understood major spending categories |
| ☐ | Kept track of expenses |
| ☐ | Established savings |
| ☐ | Paid off overdue bills |
| ☐ | Talked with other family members about specific adjustment |
| ☐ | Identified family financial goals |

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| --- | --- |
| **Debt Load** | |
| ☐ | Avoided bankruptcy |
| ☐ | Contacted creditors |

|  |  |  |  |
| --- | --- | --- | --- |
| **Income/Additional Resources** | | | |
| ☐ | Increased employment (more hours, more earners) | | |
| ☐ | Sold assets to supplement income | | |
| ☐ | Client was less defensive, more responsive | | |
| ☐ | Referred to other agencies for services | | |
| ☐ | Others, please list |  | |
| **Other Action Taken by the Individual / Family:** | | |
|  | | |

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| **Reasons for Closing the Case:** |
|  |

*Online form created by Carol Bralich, Ozaukee County, UW-Extension, August 2011. Adapted from Family Financial Counseling Volunteer Training Program, Family Living Programs, 2003.*