

College Planning & Early Retirement Questionnaire

Student's name:

Parent(s)' Names: **Father** : Birthdate **Mother**: Birthdate

Parent's Phone: _____ Other phone: _____ Email address: _____

Parent(s) Income _____ Siblings' names and ages: _____

Total Value of Student's Siblings' Assets \$ _____ (Trust/Custodial Account – Don't Include 529 or Coverdell Accounts)

If siblings are attending K-12 schools, what is the cost? _____

1. Will grandparents or other relatives be helping financially? Yes / No
If so, how much per year? \$ _____
2. Is your child a High School Senior? Yes / No If not, what grade? _____
3. What is your child's date of birth? _____
4. What type of college does the child plan to attend? Private / Public / Elite Private

List specific college(s) of interest:

5. What is the student's age / GPA / ACT / SAT/ class rank (e.g. 10/140)? _____
6. Does the student excel in some area? (i.e. Sports, Music, Student Gov't, Club(s), Volunteer Service)
7. Up until now, how did you plan to pay for college expenses?

8. Other than college, what is your most important financial goal?

9. Do you have any other financial objectives; such as 1) reduce taxes 2) eliminate debt?

10. How much do you plan to contribute per year for college costs from:

Your current income \$ _____ Your assets \$ _____

Loans for college \$ _____

11. How much is your child going to contribute per year to college costs from:

Their current income \$ _____ Their Assets \$ _____

Loans for college \$ _____

12. Child Support Paid (year to date) \$ _____ Child support Received \$ _____

Assets:

TYPE	Balance / Value	Growth Rate %	Basis	Yearly Contribution
Retirement Assets (401(k), IRAs, Pension, Profit Sharing, SEPs, Annuities, Life Insurance, etc.)				
Non-Retirement Assets (Mutual Funds, Stocks, Bonds, Savings, Cash, etc.)				
Business / Farm				
Rental				
Home (Through Credit Union)				
Vacation Home				
College:				
529 Plans				
Coverdell Savings Account				

Debts:

Name	Balance	Monthly Payment	Interest Rate	Remaining Payments
Home				
1 st Mortgage				
2 nd Mortgage				
HELOC				
Other				
Business / Farm				
Rental				
Credit Cards				
Installment				
Vehicle				
Other				

Monthly Expense

(Please provide the average monthly amount for the following expenses)

Monthly Living Expenses (food, utilities, clothes, gas, etc) \$ _____

Monthly Out-of-Pocket Medical Expense \$ _____

Monthly K-12 Private School Expense \$ _____

Monthly Health Insurance Expense \$ _____

Monthly Life Insurance Expense \$ _____

Monthly Property Insurance Expense (including home & vehicle) \$ _____

Monthly Disability Insurance Expense \$ _____

Monthly Long-Term Care Expense \$ _____

Child Assets

Type	Balance / Value	Growth Rate	Basis	Yearly Contribution
Retirement Assets (401(k), IRAs, Pension, Profit Sharing, SEPs, Annuities, Life Insurance, etc.) CD	2,000			
Non-Retirement Assets (Mutual Funds, Stocks, Bonds, Savings, Cash, etc.)				
Business / Farm				
Rental				
Home				