
APPENDIX 4. Sample Middle School Questionnaire

Name of school/location _____ Date _____

MIDDLE SCHOOL FINANCIAL EDUCATION PROGRAM – POST SESSION EVALUATION

[Name of Program]

Thank you for participating in this evaluation. Your answers will help us improve this program. Your participation is voluntary and confidential. Your responses will be combined with the responses of all other participants and you will not be individually identified on any report prepared. If you have questions, please contact (your name, title, affiliation and phone number or address). A copy of the Human Subjects Protection Approval Form is on file in the UW-Extension Provost and Vice Chancellor's Office, 432 N. Lake St., Madison, WI 53706. Completion of this evaluation implies your consent to participate. Thanks!

A. RATE THE PROGRAM

Please rate today's activities, the teachers and the overall program by circling the appropriate number

	Not helpful	Somewhat helpful	Quite helpful	Very helpful
1. The activities were...	1	2	3	4
2. The teachers were...	1	2	3	4
3. The overall program was...	1	2	3	4

B. KNOWLEDGE

Please circle ONE number for each item to indicate if this program helped you increase your knowledge or if you already knew this before participating in the program.

	Increased my knowledge	I already knew this before the program
1. The difference between needs and wants.	1	2
2. How to use financial goals to manage money better	1	2
3. What a budget [spending plan] is	1	2
4. The difference between a checking [debit] account and a credit card account	1	2
5. How credit cards work	1	2
6. The cost of buying on credit.	1	2
7. Different credit options (auto loans, leasing and credit cards)	1	2
8. Consequences of not paying credit card on time	1	2
9. The interest, or the monthly finance charge, on credit card accounts.	1	2
10. Why savings is important.	1	2
11. How to save money	1	2
12. The relationship between career choice and income	1	2
13. What things cost and work time needed to pay for those	1	2

things		
14. What a paycheck must cover	1	2
15. How much things costs (for example, the cost of electronics, sports equipment and entertainment)	1	2
16. The financial obligations one has to the community (for example, by paying taxes or giving to charities)	1	2
17. The importance of keeping my personal identification information safe.	1	2
18. The value of education beyond high school	1	2
19. The difference between saving and investing	1	2
20. The value of serving my community	1	2

D. SKILLS

Please circle ONE number that best describes your skill level as a result of participating in this program

My ability to...	Increased my skill	I already could do this
1. Create a personal budget [spending plan]	1	2
2. Write a check correctly	1	2
3. Use a debit card	1	2
4. Balance a check book register	1	2
5. Keep track of spending and income	1	2
6. Keep track of credit card use	1	2
7. Decide when to use credit (best use of credit)		
8. Keep track of savings	1	2
9. Spend wisely – make good decisions	1	2
10. Complete a job application	1	2
11. Be a safe internet user	1	2

C. CONFIDENCE

To what extent did the program increase your confidence in the following ways? Circle ONE number for each item

Increased confidence to...	Not at all	Somewhat	A great deal
1. Make goals to manage my money	1	2	3
2. Manage my money in the 'real world'	1	2	3
3. Save to meet my needs/wants	1	2	3
4. Make decisions that deal with money	1	2	3

E. INTENTIONS

Please circle the number that best describes what you plan to do as a result of attending this program

I plan to...	No	Maybe	Yes	I already do this
1. Use a budget [spending plan]	1	2	3	4
2. Know where my money goes when on my own	1	2	3	4
3. Adjust my spending to stay within my budget (spending plan)	1	2	3	4

4. Avoid unnecessary spending	1	2	3	4
5. Save money to achieve my goals	1	2	3	4
6. Make sure I get value for my money – compare cost to quality when I shop	1	2	3	4
7. Serve my community in some way	1	2	3	4

F. Possible open-ended questions:

What was the most *challenging* part of today?

What was the most *rewarding* part of today?

Do you think that this type of experience is a good way to learn about money management? Yes No Not Sure. Why or why not?

What, if anything, was different about this experience that helped you to learn about money management?

Has your view of life in the future changed as a result of attending [Program Name]

Yes No If YES, how?

Would you recommend this program to others? Yes No Why or why not?

What did you like most about this program?

What did you like least about this program?

How could this program be improved to be more useful to you?

How do you think participating in this program will help you in the future?

How could you have been better prepared for today's experience?

What additional education (classes, units/topics) would be beneficial to prepare you for managing your own finances?

Any other comments or suggestions about this program?

H. Participant profile

In what grade are you enrolled? ___6th ___7th ___8th

Do you have a checking account? YES NO

Do you have a savings account? YES NO

Do you have a credit card? YES NO

What is your ethnicity?

___African American/Black

___Asian

___Hispanic/Latino

___Native American

___White (non-Hispanic)

___Multi-racial

___Other

Thank you for completing this evaluation. Your answers help us improve our programs

OPTIONAL: If you are willing to have us contact you for follow-up, please share your name/address/phone number:

Name: _____ Phone number _____

Address: _____