

Name: _____ Date: _____

What's changing in your life.

(please check any that apply)

Family changes

Now	Anticipate in the next year or two	
		New marriage
		Divorce
		Birth of child
		Death of parent
		Care of parent
		Child leaving for college
		Health problems
		Adult child returning home
		Parent health
		Family conflict
		Moving to new community
		New house
		Home renovation
		Accident in Family

Work changes

Now	Anticipate in the next year or two	
		New job
		New position
		Layoff
		Promotion
		Change Career
		Disability
		Multiple jobs
		Sabbatical
		Starting/leaving college
		Retire
		Re-enter workforce

Name: _____ Date: _____

What's changing in your life.

(please check any that apply)

Personal changes

Now	Anticipate in the next year or two	
		Change religious affiliation
		New hobbies or activity which takes a lot of time or money
		New degree of Volunteering

Financial changes

Now	Anticipate in the next year or two	
		Lose Job
		Major new expense
		Salary or income rises significantly
		College Expenses
		Change in medical insurance
		Large dental/health bills
		Lower paying job
		New dependent
		New hobby or activity
		Emergency Home Repairs
		Inheritance
		Gambling winnings/loses
		New mortgage payments