



Class Name: _____

Date: _____

1. What is the first letter of your first name? _____
2. What is the first letter of your last name? _____
3. What is the number of the month you were born in? _____

Please circle your answer for each of the following questions.

- | | | |
|---|------|-------|
| 1. A will describes how a deceased person's assets will be distributed to heirs. | TRUE | FALSE |
| 2. A medical power of attorney allows a deceased person's designated representative to sue a medical professional for damages if the medical professional was negligent in providing care to the deceased person. | TRUE | FALSE |
| 3. A durable power of attorney is used to appoint a guardian over minor children in the event that a caregiver dies. | TRUE | FALSE |
| 4. If a person dies without a will, estate taxes must be paid. | TRUE | FALSE |
| 5. Estate planning is a process designed to help a person manage and preserve his/her assets while alive and to control the distribution of assets after his/her death. | TRUE | FALSE |
| 6. Good records should be kept of past tax returns, insurance policies, bank statements, loan contracts, wills and employment contracts. | TRUE | FALSE |
| 7. Estate planning depends on how old a person is, if they are married, and the kind of assets they own. | TRUE | FALSE |
| 8. A will allows you to designate a person as your executor to act as your legal representation after your death. | TRUE | FALSE |
| 9. A young and single person does not need to have a will. | TRUE | FALSE |
| 10. A trust is a legal entity that holds assets for a beneficiary. This can include cash, stocks, bonds, insurance policies, property and artwork. | TRUE | FALSE |

Please circle the number that best describes:

Your confidence to:	Not confident	A little confident	Somewhat Confident	Confident	Very Confident
1. Periodically discuss your end of life wishes with loved ones and make sure your living will reflects your wishes.	1	2	3	4	5
2. Periodically remind others about the location of important end of life planning documents.	1	2	3	4	5
3. Update your will and beneficiary designations as family situations change.	1	2	3	4	5
4. Create a will with the help of an attorney or "kit".	1	2	3	4	5
5. Creating a living will, in case you may become incapacitated during a medical procedure.	1	2	3	4	5

Do you currently:	No	Maybe	Yes	Already Doing This	Does not Apply
1. Periodically discuss your end of life wishes with loved ones and make sure your living will reflects your wishes.	1	2	3	4	5
2. Periodically remind others about the location of important end of life planning documents.	1	2	3	4	5
3. Update your will and beneficiary designations as family situations change.	1	2	3	4	5
4. Create a will with the help of an attorney or "kit".	1	2	3	4	5
5. Creating a living will, in case you may become incapacitated during a medical procedure.	1	2	3	4	5



Student Initials _____
 Class Name: _____
 Date: _____

Please rate the following program:

	Not Helpful	Somewhat Helpful	Helpful	Very Helpful
Instructor	1	2	3	4
Educational Materials	1	2	3	4
Overall Program	1	2	3	4

Please circle the answer to the following questions:

- | | | |
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Your confidence to:

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5. Creating a living will, in case you may become incapacitated during a medical procedure.	1	2	3	4	5

As a result of this program, do you plan to:

	No	Maybe	Yes	Already Doing This	Does not Apply
1. Periodically discuss your end of life wishes with loved ones and make sure your living will reflects your wishes.	1	2	3	4	5
2. Periodically remind others about the location of important end of life planning documents.	1	2	3	4	5
3. Update your will and beneficiary designations as family situations change.	1	2	3	4	5
4. Create a will with the help of an attorney or "kit".	1	2	3	4	5
5. Creating a living will, in case you may become incapacitated during a medical procedure.	1	2	3	4	5