

Parent(s) Name: _____

Date: _____

Parent/Adult Child “*Strings*” Check-List *(Financial Help we Provide)*

Adult Child’s first name: _____ True Age: _____ (Age I see him/her in my mind’s eye: _____)

1) Adult Child’s **Living** Situation (Home, Apt., Etc.): _____

2) **Transportation** Situation: _____

3) **Auto Insurance** Situation: _____

4) Adult Child’s **Money/Savings/Assets/ Trust Fund:** _____

5) **JOINT (with us) Bank Accounts/Credit Cards:** _____

6) Adult Child’s **Cell Phone** Situation: _____

7) Adult Child’s **Health Insurance** Situation: _____

8) Adult Child’s **Present Employment** Situation: _____

9) Adult Child’s **Past Employment History:** _____

10) Amount of **Money Adult Child Owes us** From Loans: _____

11) Adult Child’s **Personal Belongings** Stored in our home or other place we’re responsible for:

12) **Adult Child’s School & Other Expenses:** _____

13) **Adult Child Receives this type of Personal Mail at our home:** _____
