

IDA Final Interview: A Success Story

Congratulations once again on making it through the program! Please take one more moment to help us get some important information about your stay in the program. This kind of information helps us achieve the following: spread the word about IDAs, show future participants that they can be successful, and show our funders that this program truly makes a difference in people's lives. Thanks for your time!

IDA Agency Name _____

Account Holder background information:

- Full name _____ May we refer to you by your name in any literature? YES NO
- Your current occupation: _____
- Brief description of family (married/unmarried, # of children, ages, etc.) _____

- Date of enrollment in IDA program _____ How much did you typically save each month? _____
- For how long did you save (in months): _____ Did you use direct deposit? _____
- Date of asset purchase (Estimate) _____
- Describe the asset (kind of house-- in what kind of neighborhood? Kinds of classes for what job in what career? Kind of equipment for what business?) _____

- Were any other funds leveraged (ADDI, MSHDA, etc.)? _____
- How did you first learn about the IDA program? _____
- What kind of savings habits did you have before enrolling in the IDA program? (Did you have a bank account? Did you use a household budget?) _____

- How did your participation in the IDA program most impact you life or your family?

- How has participation in the IDA program influenced your outlook on the future?

- What has changed since you purchased your asset?

- Do you plan to continue a regular savings plan? YES NO UNDECIDED

If yes, what are you saving for and why? _____

Do you plan to continue to use a household budget? YES NO UNDECIDED

- Have you recommended this program to family or friends? _____ Have they joined? _____

- Do you have any advice for new IDA account

holders? _____

- Would you be willing to speak at any IDA peer support meetings or state-wide conferences about your experiences with the program?

- Are you interested in learning about any of our other programs? _____

- **Updated contact information:**

Street and mailing address _____

Telephone numbers _____ fax number _____

e-mail _____ Web site address _____

Please include any pictures, newspaper clippings or other documents that help tell your story.

For Office Use Only (Please add any additional comments about this success story):
