**Check list for Interviewing A Financial Planner**

Planner Name: ______________________________

Company: ______________________________

Address: ______________________________

Phone: ______________________________

Date: ______________________________

**1. Do you have experience in providing advice on the topics below?**

If yes, please indicate the number of years.

- ☐ Retirement planning ________
- ☐ Investment planning ________
- ☐ Tax planning ________
- ☐ Estate planning ________
- ☐ Insurance planning ________
- ☐ Intergrated Planning ________
- ☐ Other ______________________________

**2. What are your areas of specialization? What qualifies you in this field?**

______________________________

______________________________

______________________________

**3. A. How long have you been offering financial planning advice to clients?**

- ☐ Less than one year
- ☐ One to four years
- ☐ Five to 10 years
- ☐ More than 10 years

**B. How many clients do you currently have?**

- ☐ Less than 10 clients
- ☐ 11 to 39
- ☐ 40 to 79
- ☐ 80 +

**4. Briefly describe your work history:**

______________________________

______________________________

______________________________

______________________________

**5. What are your educational qualifications? Give area of study.**

- ☐ Certificate________________________________
- ☐ Undergraduate Degree ________________________
- ☐ Advanced Degree ___________________________
- ☐ Other ____________________________________

**6. What financial planning designation(s) do you hold?**

- ☐ Certified Financial Planner or CFP
- ☐ Certified Public Accountant - Personal Financial Specialists (CPA-PFS)
- ☐ Chartered Financial Consultant (ChFC)

**7. What financial planning continuing education requirements do you fulfill?** ______hours every______

**8. What licenses do you hold?**

- ☐ Insurance
- ☐ Securities
- ☐ CPA
- ☐ JD
- ☐ Other ____________________________________________________

**9. A. Are you personally licensed or registered as an Investment Adviser with the?**

- ☐ State(s)? ________________________________
- ☐ Federal Government?

If no, why not? ________________________________

**B. Is your firm licensed or registered as an Investment Adviser with the:**

- ☐ State(s)? ________________________________
- ☐ Federal Government?

If no, why not? ________________________________

**C. Will you provide me with your disclosure document Form ADV or its state equivalent form?**

- ☐ Yes
- ☐ No

If No, why not? ______________________________________________

**10. What services do you offer?** ______________________________________________

______________________________________________

______________________________________________

______________________________________________

**11. Describe your approach to financial planning.**

______________________________________________

______________________________________________

______________________________________________

______________________________________________

**12. A. Who will work with me on my plan?**
- ☐ Planner ______________________________
- ☐ Associate(s)______________________________

**B. Will the same individual(s) review my financial situation?**
- ☐ Yes
- ☐ No

If no, who will?______________________________

**13. How are you paid for your services?**
- ☐ Fee
- ☐ Commission
- ☐ Fee and commission
- ☐ Salary
- ☐ Other______________________________

**14. What do you typically charge?**

**A. Fee:**

Hourly Rate $_____@ hour
Flat fee (range) $_____ to $________
Percentage of assets under management _______ percent

**B. Commissions:**

What is the approximate percentage of the investment or premium you receive on:
stocks and bonds _________; mutual funds _________; annuities _________; insurance products _________; other ___________

**15. A. Do you have a business affiliation with any company whose products or services you are recommending?**
- ☐ Yes
- ☐ No

Explain ________________________________________

**B. Is any of your compensation based on selling products?**
- ☐ Yes
- ☐ No

Explain ______________________________________________

**C. Do professionals and sales agents to whom you may refer me to send business, fees or any other benefits to you?**
- ☐ Yes
- ☐ No

Explain ___________________________________________

**D. Do you have an affiliation with a broker/dealer?**
- ☐ Yes
- ☐ No

**E. Are you an owner of, or connected with, any other company whose services or products I will use?**
- ☐ Yes
- ☐ No

Describe ___________________________________________

**16. Do you provide a written client engagement agreement?**
- ☐ Yes
- ☐ No

If No, why not? ___________________________________________