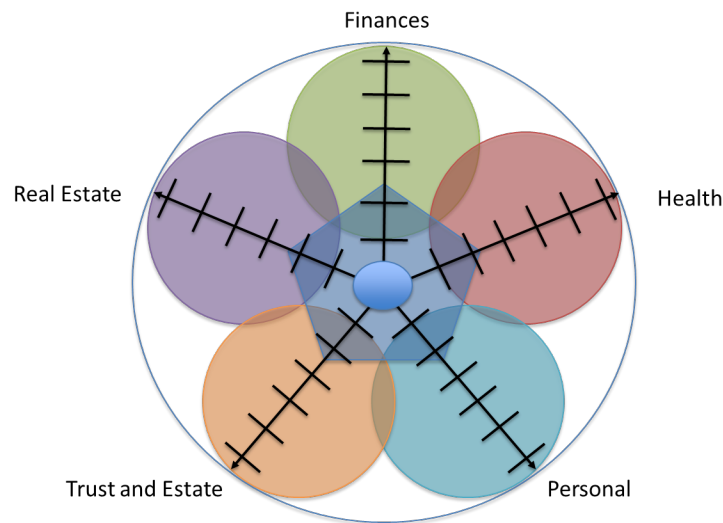


# Self Evaluation Exercise

**A workbook to help you evaluate your homeownership**

Prepared by: Brian Schwatka, Realtor & Transition Specialist (DRE# 01426785)

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For more information, visit: <https://www.StayOrGoHomeowner.com>  
Brian Schwatka: Cell/Text: 408-499-9561 email: [Brian@StayOrGoHomeowner.com](mailto:Brian@StayOrGoHomeowner.com)

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## Step 1: The Self Evaluation Exercise

**Note:** Step 2 (The Postcard from the Future) can be found at [www.StayOrGoHomeowner.com/Start](http://www.StayOrGoHomeowner.com/Start)

The ultimate goal of the Stay Or Go Homeowner System is to help homeowners make the best decisions for their future, whether they are staying or going. In order to break the "**Paralysis of Analysis**" that many homeowners experience, you need Clarity, Certainty and Confidence.

CLARITY comes from (Step 1) evaluating where you are today and (Step 2) visualizing your perfect future.

CERTAINTY comes from knowing WHERE you are going, whether that is staying in your current home, purchasing a new home, relocating out of the area, or transitioning to a retirement community (here or there).

CONFIDENCE comes from having a detailed Flight Plan that spells out every step you'll need to take to get you to your destination.

This Self-Evaluation exercise will help you visualize imbalances in your current homeownership and give you a clear picture of what needs to be worked to obtain balance.

Self-Evaluation Instructions:

- 1) For each of the five categories, answer all six of the questions.
- 2) Add up the number of times that you answered "yes" and record that number at the bottom of each category.
- 3) Starting from the center of the wheel, plot your scores (1-6) in each corresponding category.
- 4) Connect the dots and you will see how balanced your wheel is, or isn't...

## Evaluate and Score Your **Financial Position:**

- |   |    |     |
|---|----|-----|
| 1. I know exactly what my monthly income and expenses are:                | NO | YES |
| 2. I am cash flow positive every month (maintenance & emergencies):       | NO | YES |
| 3. I have an investment portfolio and an adequate net worth:              | NO | YES |
| 4. I have Long Term Care Insurance:                                       | NO | YES |
| 5. I can afford to pay for skilled nursing or in-home care (\$6-12K/Mo.): | NO | YES |
| 6. I have a formal written financial plan that spells out my future:      | NO | YES |

**Financial (Self Evaluation)**

**1 2 3 4 5 6**

## Evaluate and Score Your **Physical (Health/Social):**

- |   |    |     |
|---|----|-----|
| 1. My health will stay relatively the same for the next 5-10 years: | NO | YES |
| 2. I keep my mind and body active:                                  | NO | YES |
| 3. I have a great social life and stimulating experiences:          | NO | YES |
| 4. I drive myself wherever I need to go, and I enjoy driving:       | NO | YES |
| 5. I still enjoy cooking and I eat a nutritious diet:               | NO | YES |
| 6. I can relocate to any area without ties to my doctor             | NO | YES |

**Physical & Wellbeing (Self Evaluation)**

**1 2 3 4 5 6**

## Evaluate and Score Your **Personal (Support Network):**

- |   |    |     |
|---|----|-----|
| 1. Someone lives with me (married, roommate, etc.):           | NO | YES |
| 2. My immediate family lives near me:                         | NO | YES |
| 3. My local friends and family are willing to care for me:    | NO | YES |
| 4. My neighbors are willing to help and support me:           | NO | YES |
| 5. I am happy with my current living situation:               | NO | YES |
| 6. I can relocate without ties to my friends, groups, hobbies | NO | YES |

**Social & Emotional (Self Evaluation)**

**1 2 3 4 5 6**

## Evaluate and Score Your **Trust & Estate Position:**

- |   |    |     |
|---|----|-----|
| 1. I have a trust in place:                                     | NO | YES |
| 2. I have reviewed my trust in the past 5 years:                | NO | YES |
| 3. I know how the title is held to my home:                     | NO | YES |
| 4. I know what to do when/if a co-owner passes away:            | NO | YES |
| 5. I know that I will avoid probate should a co-owner pass:     | NO | YES |
| 6. I have a list of home upgrades and the cost of each upgrade: | NO | YES |

**Estate & Legal (Self Evaluation)**

**1 2 3 4 5 6**

## Evaluate and Score Your **Real Estate (Functionally):**

- |  |    |     |
|--|----|-----|
| 1. My home is in good condition:                                 | NO | YES |
| 2. My home has been remodeled and I love it:                     | NO | YES |
| 3. I enjoy and can afford maintaining the condition of the home: | NO | YES |
| 4. My home is in a safe and friendly neighborhood:               | NO | YES |
| 5. My home suits my lifestyle today (size and function)          | NO | YES |
| 6. My home is safe and has a downstairs bedroom and full bath:   | NO | YES |

**Real Estate "Functionality" (Self Evaluation)**      **1   2   3   4   5   6**

## Are you well balanced?

