



LIFE TRANSITIONS PROFILE

Name _____

Personal / Family

Priority Level

- | | | | |
|--|----------------------------|----------------------------|----------------------------|
| Adopting a child | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Child entering adolescence | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Child getting married | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Child going away to college | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Child preparing for college | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Child with special needs | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Concerned about an aging parent | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Concerned about personal health | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Concerned about the health of spouse or child | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Empty nest | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Entering single parenthood | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Expecting a child | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family member diagnosed with cancer | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family member expected to die soon | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family member in need of professional care | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family member with a disability or serious illness | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family member with special needs | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Getting married | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Going through a divorce or separation | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Need to hire childcare | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Providing assistance to a family member | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Recent birth of a child | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Recent death of family member | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Recent loss of your spouse (widowhood) | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Family special event | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |

Work / Career

- | | | | |
|---|----------------------------|----------------------------|----------------------------|
| Buying an existing business | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Contemplating Career Change | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Downshift / Simplify work life | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Expanding an existing business | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Full retirement from current job / career | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Gaining or losing a business partner | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Job loss | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Job promotion | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |

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Not Guaranteed by any Government Agency	Not a Bank/Credit Union Deposit	

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|---|----------------------------|----------------------------|----------------------------|
| Job restructuring | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| New Job | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| New job training or education program | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Phasing into retirement | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Selling or closing a business | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Starting a new business | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Taking a sabbatical or leave of absence | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Transferring business to family member | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |

Financial / Investment

- | | | | |
|---|----------------------------|----------------------------|----------------------------|
| Concerned about debt | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Considering an investment opportunity | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Considering changing financial service provider | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Purchasing a home | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Receiving an inheritance or financial windfall | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Reconsidering investment philosophy | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Refinancing mortgage | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Relocating | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Selling a house | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Selling assets | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Significant investment gain | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Significant investment loss | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |

Community / Charitable

- | | | | |
|--|----------------------------|----------------------------|----------------------------|
| Creating or funding a foundation | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Creating or funding a scholarship fund | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Develop an end of life plan | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Develop or review an estate plan | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Gifting to children or grandchildren | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Give to church / religious organizations or causes | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Give to community causes or events | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Give to other charitable organizations | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |
| Monthly stipend to parent(s) (parental pension) | <input type="checkbox"/> H | <input type="checkbox"/> M | <input type="checkbox"/> L |

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