

Risk Tolerance Evaluation Form

Date: _____

To whom it may concern,

This letter serves as a template for the Risk Tolerance Evaluation. Please complete the following sections to help us assess your risk tolerance level.

Personal Information

Name: _____

Address: _____

Email: _____

Phone Number: _____

Risk Assessment Questions

1. What is your age? _____

2. What is your investment experience? (e.g., novice, intermediate, expert)

3. What are your financial goals? (e.g., retirement, education, wealth accumulation)

4. How would you describe your risk tolerance? (e.g., conservative, moderate, aggressive)

5. Are you comfortable with potential fluctuations in the value of your investments? (Yes/No)

Signature

(Signature)

Thank you for your cooperation in completing this Risk Tolerance Evaluation Form.

Sincerely,

[Your Name]

[Your Position]

[Your Company]