**Survival Project**

What are my responsibilities? What am I able to afford? You have just graduated from high school and decided to move out on your own without your parent or guardians’ assistance. You are an independent, respectable and responsible citizen! You are currently working full-time with the following provisions:

* $12/ hr
* 40 hrs work week
* 5 days per week
* Deductions for tax purposes is 20%
* Medical Services Plan (**Monthly**) is $67 per person which is deducted off your paycheck monthly

Your task will include a **REALISTIC & ACCURATE** overview of your expenditures that is based on your income after taxes. You will need to set up your own home. You are fortunate that your parents /guardians have let you leave home with only the clothes that you own. You are responsible for figuring out the following:

1. Calculate **MONTHLY** income ($12/hr at 40 hours per week) - deductions
2. Calculate Expenses for:
   1. Transit
   2. Celebration costs (Mother’s Day/Father’s Day/Birthday/ Wedding/ Christmas/etc.) **$30 a month**
   3. Housing: Find housing within your desired city. Take into account the neighbourhood, the amenities and how you will get to and from work. You may have a roommate(s) (you may only choose your classmates) to help offset your costs. You must have separate bedrooms if you are sharing a house (two people cannot live in a one bedroom apartment for the purpose of this assignment).
      * City
      * Location (address)
      * Cost (Rent)
      * The actual advertisement and what it includes (Please copy it as sometimes ads are removed)
      * Look at www.castanet.net or [www.kijiji.ca](http://www.kijiji.ca) if renting in the Okanagan. Look at <https://kelowna.craigslist.ca> if renting in Vancouver.
   4. Utilities: You will need to indicate the ***Service Provider, Service Details (Plan) and Cost***
      * Phone (Cell/Land Line)
      * Internet
      * Television (Specify Option)
      * Hydro/Natural Gas
   5. Furnishing & Décor: You will need to indicate ***Retailer, Detailed List of Purchase(s), and Cost***.
      * Bed/Dresser/Desk/Chair/Couch/Table/etc.
      * Artwork/Memorabilia/etc.
   6. Food: You will need to indicate ***Retailer, Detailed List of Purchase(s), and Cost***.
      * Grocery Bill
      * Eating Out Bills
      * Anything food related
   7. Toiletries: You will need to indicate ***Retailer, Detailed List of Purchase(s), and Cost***.
      * Tissue/Bathroom Tissue
      * Shampoo/Soap/Deodorant/Toothpaste/Toothbrush/Feminine Hygiene Products
   8. Household Items: You will need to indicate ***Retailer, Detailed List of Purchase(s), and Cost***.
      * Kitchen Equipment/Utensils/Kitchen Towels & Cloths
      * Bed Linens/Bath Towels
      * Household Cleaners/Detergent/Dishwashing Soap/Broom/Dustpan/Mop/Bucket
   9. Transportation: You will need to indicate ***Mode of Transportation(s) chosen and Cost***.
      * Car – insurance, gas, parking
      * Public Transportation - bus pass, fare savers, etc.
   10. Clothing: You will need to indicate ***Retailer, Merchandise(s) Purchased and Cost.***
       * Yourself
   11. Entertainment: You will need to indicate the ***Activity(s) chosen, Location/Service Provider and Cost.***
       * Athletics: Gym Membership, Sport League, Community Centre Membership, Swimming, Dancing, etc.
       * Lessons: Music, Art, Floristry, Auto Maintenance, Cooking, etc.
       * Movie(s)
       * Night Life
       * Vacation
       * Other...
   12. Savings: Your goal is to be able to save money every month in case of a rainy day. **10% of your Net Pay**

Blank Monthly Calendars to organize expenses (pay day, grocery shopping day, transit pass purchase, rent due etc.)

**Follow-Up Questions:**

**Please respond in full detail.**

1. What did you need?
2. What did you want?
3. How was this assignment easy or difficult for you?
4. Were you able to purchase services/merchandise that you needed?
5. Were you able to purchase services/merchandise that you wanted?
6. What choices did you make to enable you to be financially stable?
7. What conclusion can you draw from this assignment?
8. Is your EXCESS (Deficiency) at ZERO

**Name:**

**DUE DATE:**

**Evaluation:**

Please submit with your assignment.

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| **Criteria** | **Self Evaluation** | **Teacher Evaluation** |
| Monthly Income Correctly Calculated (after tax) | **/15** |  |
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|  |  |  |
|  |  |  |
| Expenditures: Accurate, Realistic, Detailed | **/50** |  |
|  | **/10** |  |
| Follow Up Questions | **/10** |  |
| Total | **/110** |  |

Work Habit Mark: G S N

Your Comments:

Teacher Comments: