



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

*Directions: Print two copies of this form. Each partner should fill-out this form separately and bring to the first appointment.*

1. What do you expect from couples counseling?

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2. Have you had couple's counseling in the past? No \_\_\_\_ If yes, explain what was most helpful and what was not.

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3. In your opinion, what is the main reason you and your partner are seeking the help of a couples' counselor at this time?

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4. What traits do you most appreciate in your partner? \_\_\_\_\_

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5. What are the things you like most about your relationship?

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6. What are the top three things you wish to change about your relationship? *When do you feel most frustrated in your relationship?*

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7. How much do you agree or disagreement with this statement?

*Our fights and arguments are very destructive to our relationship.*

0 1 2 3 4 5 6 7 8 9 10  
Totally Disagree Totally Agree

8. What do you and your partner argue about most often? \_\_\_\_\_

9. Have there been any incidents of physical violence or threats of violence? No \_\_\_ *If yes, describe.*

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10. Do you or your partner have difficulties with alcohol or substance abuse? No \_\_\_ *If yes, describe.*

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11. Has there been any infidelity in your relationship? No \_\_\_ *If yes, describe.*

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12. How open are you in expressing your innermost thoughts and feelings with your partner?

0 1 2 3 4 5 6 7 8 9 10  
Completely Closed Completely Open

13. How easy or difficult is it to communicate with your partner?

0 1 2 3 4 5 6 7 8 9 10  
Extremely Difficult Extremely Easy

14. Overall, how connected do you feel to your partner?

0 1 2 3 4 5 6 7 8 9 10  
Completely Separate Completely Attached

15. Are you sexually active with your partner? No \_\_\_\_ *If yes, how satisfied are you with your sex life with your partner?*

0 1 2 3 4 5 6 7 8 9 10  
Completely Unsatisfied Completely Satisfied

16. Is there anything else you feel is important to share at this time?

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17. How committed are you to staying in the relationship: \_\_\_\_\_%