

Couple Satisfaction Checklist



Name _____ Date _____

Mark the box for each relationship category that best describes how satisfied you feel.

****Circle your top three (3) concerns****

	Very Dissatisfied	Moderately Dissatisfied	Slightly Dissatisfied	Slightly Satisfied	Moderately Satisfied	Very Satisfied
1. Degree of Closeness, Openness, Confiding, Sharing, and Comforting						
2. Expression of Affection and Caring						
3. Sexual Intimacy						
4. Handling Conflicts and Arguments						
5. Expression of Anger, Criticism, or Blame						
6. Handling Family Finances						
7. Handling of Parenting Issues						
8. Handling of Household Tasks						
9. Common Interests and Social Life						
10. Degree of Respect for Your Partner						
11. Degree of Admiration for Your Partner						
12. Degree of Gratitude Toward Your Partner						
13. Your Role in the Relationship						
14. Your Partner's Role in the Relationship						
15. Overall Relationship with Your Partner						