

Couples Questionnaire



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

How long have you been with your partner? \_\_\_\_\_

Do you have children?

Yes

how many \_\_\_\_\_  
bio / step / adopted

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Gender & Age*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No

1. How did you and your partner meet?

\_\_\_\_\_  
\_\_\_\_\_

2. What attracted you to your partner?

\_\_\_\_\_  
\_\_\_\_\_

3. List 3 things you like about your partner

- i. \_\_\_\_\_
- ii. \_\_\_\_\_
- iii. \_\_\_\_\_

4. List 3 things your partner does that irritates you

- i. \_\_\_\_\_
- ii. \_\_\_\_\_
- iii. \_\_\_\_\_

5. What are the pros and cons about your sex life?

\_\_\_\_\_  
\_\_\_\_\_

## Couples Questionnaire

6. Currently, what is the most serious issue in your relationship?

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7. What have you tried previously to help solve this problem?

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i. What has worked?

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ii. What has not worked?

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8. List 3 things you are willing to do to change the relationship

i. \_\_\_\_\_

ii. \_\_\_\_\_

iii. \_\_\_\_\_

9. List 3 things you wish your partner would do to change the relationship

i. \_\_\_\_\_

ii. \_\_\_\_\_

iii. \_\_\_\_\_

10. What are you noticing when things are going well in your relationship?

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## Couples Questionnaire

11. What are you noticing when things are **not** going well in your relationship?

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12. Describe a recent conflict with your partner

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13. What thoughts do you have during conflicts? (e.g., *I'll show her!*, *He'll be sorry now!*, *I don't have to take that!*, *I'm no good*, etc.)

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14. Think about a negative pattern in your relationship; describe what you do, describe what your partner does

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15. Why are you seeking therapy at this time?

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16. Please list things about yourself, your spouse, or your relationship that you would like me to know to understand you better

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***Thank you***