Couples Counseling Initial Intake Form

Please note that while you will be asked to talk about your answers in sessions, your partner will not be shown this form.

Name:		<u></u>		Date	
Phone:		May I leave a	message?	Y / N	
Is it acceptable to email y	ou? If so, email address:				
Relationship Status: (check	all that apply)				
☐ Married☐ Separated	□Living Toge □Living apar				
What do you hope to acc	omplish through counselir	ng? 			_
	one to deal with the diffic				_
What are your biggest str	rengths as a couple?				_
feelings about the relatio	level of relationship happing the state of t				— n your current
(extremely unhappy)				(extremely happy)	
Please make at least one what your partner does:	suggestion as to somethin	ng you could person	nally do to ir	mprove the relatior	nship regardless
· · · · · · · · · · · · · · · · · · ·	couples counseling related	•	•		lo
Where:		ngth of treatment_			

	•					g before? ddressed.		□ Yes [□No		
	-	-	-			or take drug		intoxication	n?	□Yes	s □No
Do you	ı ever wi	ish youı	r partne	r would	cut bac	ck on his/h	er dr	inking or dr	ug use	? □Yes	s □No □N/A
Have e □Yes	-	-	-			ically restra hat happe			ence ag	ainst or	injured the other person?
	her of y	ou thre If yes,		to separa		divorce (if i irtner		ried) as a res Both of us	sult of t	the curre	ent relationship problems?
If marr □Yes			r you or who?	your pai		onsulted w ortner		lawyer abo Both of us	out divo	orce?	
•	perceiv No		either yo who?	ou or you □Me	•			awn from th Both of us	e relat	ionship?	
How er	njoyable	is your	· sexual	relations	ship? (0	Circle one)					
	(extr	1 emely unp	2 oleasant)	3	4	5	6	7	8	9	10 (extremely pleasant)
How sa	atisfied a	are vou	with the	e freque	ncv of	vour sexua	l rela	ations? (Circ	le one)	
		1 emely uns	2	3	4	5	6	7	8	9	10 (extremely satisfied)
What is	s vour ci	urrent l	evel of s	tress (ov	verall)?	(Circle on	e)				
	(no s	1	2	3	4	5	6	7	8	9	10 (high stress)
What is	s your cı	urrent l	evel of s	tress (in	the re	lationship)					
	(no s	1 tress)	2	3	4	5	6	7	8	9	10 (high stress)

Rank the order of the to	op three concerns you have	in your relationship with yo	our partner (1 being the	most problematic)
1				
2				
3				