## **INSTRUCTIONS:**

Below you will find several questions about your relationship with your spouse/partner. Please place an "X" over the circle that best indicates how often each of the following situations occurs.

	Never	Less Than Once a Month	At Least Once a Month	At Least Once a Week	Every Day
1. How often do you argue with your spouse?	0	0	0	0	0
2. How often does your spouse criticize you?	0	0	0	Ο	0
3. How often does your spouse complain about your behavior?	0	0	0	0	0
4. How often does your spouse prevent you from doing something you want to do?	0	0	0	0	0