

Couple Communication Worksheet

Patient Information (Partner 1)

Name: _____ Date of birth: _____ Gender: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Patient Information (Partner 2)

Name: _____ Date of birth: _____ Gender: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Section 1: Communication Styles

1. How do you communicate your needs and wants to your partner?

2. How do you respond to your partner when they communicate their needs and wants to you?

3. Are there any communication habits that you would like to change?

4. Are there any communication habits that you appreciate in your partner?

Section 2: Conflict Resolution

1. How do you approach conflicts in your relationship?

2. Do you feel that conflicts are resolved in a fair and respectful way?

3. Is there anything you would like to change about the way conflicts are handled in your relationship?

4. Are there any unresolved conflicts that you would like to address?

Section 3: Emotional Connection

1. How do you express affection to your partner?

2. What activities or behaviors help you feel emotionally connected to your partner?

3. Are there any barriers to feeling emotionally connected to your partner?

4. How can you work together to strengthen your emotional connection?

Section 4: Relationship Goals

1. What are your individual goals for your relationship?

2. Are there any shared goals that you would like to work towards together?

3. How do you plan to achieve your relationship goals?

4. What role do you see communication playing in achieving your goals?

Thank you for taking the time to complete this Couple Communication worksheet. This information will help you and your partner understand each other better and work towards a stronger, healthier relationship. If you have any questions or concerns, please do not hesitate to discuss them with your therapist.