

Relationship Needs Checklist

Name:

Date:

Relationship Need	Is this need being met?
Acceptance	<input type="checkbox"/>
Affection	<input type="checkbox"/>
Autonomy	<input type="checkbox"/>
Communication	<input type="checkbox"/>
Conflict resolution	<input type="checkbox"/>
Connection	<input type="checkbox"/>
Effort	<input type="checkbox"/>
Emotional readiness	<input type="checkbox"/>
Empathy	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>
Intimacy	<input type="checkbox"/>
Kindness	<input type="checkbox"/>
Prioritization	<input type="checkbox"/>

Respect	<input type="checkbox"/>
Shared Values	<input type="checkbox"/>
Security	<input type="checkbox"/>
Satisfaction	<input type="checkbox"/>
Space	<input type="checkbox"/>
Trust	<input type="checkbox"/>
Validation	<input type="checkbox"/>

Total: /20

Additional Notes: