

Name: _____

Date: _____

Please Answer True or False to the Following:

True

False

- | | | |
|-------|-------|---|
| _____ | _____ | I am satisfied with my life in general. |
| _____ | _____ | I am satisfied with my relationship with my spouse/partner. |
| _____ | _____ | I am satisfied with my job/career. |
| _____ | _____ | (If applicable) I am satisfied with my relationship with my children. |
| _____ | _____ | I am satisfied with my relationship with my friends. |
| _____ | _____ | I am satisfied with my relationship with my family. |
| _____ | _____ | I have a hard time motivating myself. |
| _____ | _____ | I have a hard time staying focused at work or at home. |
| _____ | _____ | I generally feel hopeful and look forward to each day. |
| _____ | _____ | I am generally active and interested in things. |
| _____ | _____ | I often feel helpless during the day. |
| _____ | _____ | I often have trouble sleeping. |
| _____ | _____ | I have a normal appetite. |
| _____ | _____ | I eat too much. |
| _____ | _____ | I don't eat much. |
| _____ | _____ | When I am sad or upset, I drink alcohol to feel better. |
| _____ | _____ | When I am sad or upset, I take drugs to feel better and relax me. |
| _____ | _____ | I have tried to end my life in the past. |
| _____ | _____ | I have had thoughts of ending my life recently. |
| _____ | _____ | My mood changes often, sometimes daily. |
| _____ | _____ | I tend to obsess on things. |
| _____ | _____ | I am easily agitated and feeling out of sorts. |
| _____ | _____ | I sometimes/often feel overwhelmed. |
| _____ | _____ | I have energy and vitality. |

If you have any additional comments, please write them here: