

## Marriage Survey (Husband)

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Rate your marriage in terms of YOUR SATISFACTION in the following areas using a scale of 1-10 (10) being, *REALLY* satisfied; and (1) being *NOT* satisfied at all.

Time Together (Fun/Quality) \_\_\_\_\_

Time Together (Planning/Working/Projects) \_\_\_\_\_

Communication \_\_\_\_\_

Finances \_\_\_\_\_

Children \_\_\_\_\_

Sex/Love Life \_\_\_\_\_

Spiritual Life Together \_\_\_\_\_

Relationship with your parents \_\_\_\_\_

Relationship with your in-laws \_\_\_\_\_

Overall Marriage \_\_\_\_\_

**Please return this completed form with your application. Thank you!**