



## WEEKLY CHECK-IN: RELATIONSHIP ENHANCEMENT

Please answer the following questions each week and share with your counselor:

- 1) On a scale of 1 to 10 (1=very little; 10=extremely), how motivated do you feel this week to improve your relationship?

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- 2) Whose behavior in this relationship/family can you control?

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- 3) What did you do this week to improve the quality of your relationship?

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\_\_\_\_\_  
\_\_\_\_\_

- 4) Looking back at the week, what is one thing you wish you would have done differently for your relationship? What would you like to do differently next time?

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- 5) Are you willing to think of one thing you can do differently between now and your next counseling session to improve the quality of your relationship? If so, what is it?

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