

Your Name: _____ Date: _____

Please complete the following surveys BEFORE and AFTER the session. Then complete the survey on the back AFTER the session. Thank you!

Brief Mood Survey*

Instructions. Use checks (✓) to indicate how you're feeling *right now*. Please answer all the items.

How **depressed** do you feel right now?

	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
1. Sad or down in the dumps					
2. Discouraged or hopeless					
3. Low self-esteem, inferiority, worthlessness					
4. Loss of motivation to do things					
5. Loss of pleasure or satisfaction in life					
Total →					

How **suicidal** do you feel right now?

	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
1. Do you have any suicidal thoughts?					
2. Would you like to end your life?					
Total →					

How **anxious** do you feel right now?

	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
1. Anxious					
2. Frightened					
3. Worrying about things					
4. Tense or on edge					
5. Nervous					
Total →					

How **angry** do you feel right now?

	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
1. Frustrated					
2. Annoyed					
3. Resentful					
4. Angry					
5. Irritated					
Total →					

How much psychotherapy homework have you done since your last session? (✓)

None	A little	A moderate amount	A lot

After Session

0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Total →				

0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Total →				

0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Total →				

0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Total →				

Positive Feelings Survey*

Instructions. Use checks (✓) to indicate how you're feeling *right now*. Please answer all the items.

	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
1. I feel worthwhile.					
2. I feel good about myself.					
3. I feel close to people.					
4. I feel productive.					
5. I feel motivated to do things.					
6. I feel calm and relaxed.					
7. I feel a connection to others.					
8. I feel hopeful.					
9. I feel encouraged and optimistic.					
10. My life is satisfying.					
Total →					

0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Total →				

Relationship Satisfaction *

Put the name of an important relationship in your life:

Use checks (✓) to indicate how you feel about this relationship.

Please answer all 5 items.

	0—Very Dissatisfied	1—Moderately Dissatisfied	2—Somewhat Dissatisfied	3—Neutral	4—Somewhat Satisfied	5—Moderately Satisfied	6—Very Satisfied
1. Communication and openness							
2. Resolving conflicts							
3. Degree of affection and caring							
4. Intimacy and closeness							
5. Overall satisfaction							
Total →							

0—Very Dissatisfied	1—Moderately Dissatisfied	2—Somewhat Dissatisfied	3—Neutral	4—Somewhat Satisfied	5—Moderately Satisfied	6—Very Satisfied
Total →						