



Asha Jane, MA, LMFTA
Licensed Marriage & Family Therapist Associate
11300 Antler Lane
Austin TX 78726
P: 512.567.6944
E: aj@ashajane.com

Couples Information Form

How long have you been in the current relationship? _____

How and under what circumstances did you meet each other? _____

What are the strengths in your current relationship? _____

What are the present concerns or problems in the relationship? _____

What help have you sought for the relationship? When, where, how? _____

Are you currently working with any other therapists? ____ If yes, please give names, phone numbers and length of time: _____

How do you nurture the relationship? _____



Asha Jane, MA, LMFTA
Licensed Marriage & Family Therapist Associate
11300 Antler Lane
Austin TX 78726
P: 512.567.6944
E: aj@ashajane.com

How do you express and receive affection in your relationship? _____

How often do you make love with each other? _____

Has there ever been any violence in your relationship? _____ If so, please describe: _____

Have there been any separations in your relationship? _____ If so, please describe: _____

What is your goal for the relationship in making this appointment? _____
