

## Background Information

(for Neurotypical partner of person with ASD)

**Please complete, scan (or take a picture), and send to [sbh2329@gmail.com](mailto:sbh2329@gmail.com) prior to our first appointment—thank you!**

Name \_\_\_\_\_

Phone number (we will use for phone sessions) \_\_\_\_\_

Email address \_\_\_\_\_

How many years have you been together with your partner? \_\_\_\_\_

Do you have children together? If so, please share a little about each.

What do you hope to accomplish by working together?

When did you first learn about your partner being on the spectrum?

How do you feel about your partners neurodiverse diagnosis/traits?

What strategies are working for you presently?

What areas would you like to see the most change?

What do you do for regular self-care?

What are the most difficult aspects to your present relationship?

How are your stress and anxiety levels?

How well do you and your partner communicate?