**Stress Survey**

 **Check an x by any stressors that you have had in the past 3 years**

|  |  |  |  |
| --- | --- | --- | --- |
| Life event/situation  |  X  |  Life event/situation  |  X  |
| Death of spouse |  | Trouble w/in-laws |  |
| divorce |  | Son/daughter leaving home |  |
| Separation from spouse |  | New job or stopped working  |  |
| incarceration |  | Began or ended school |  |
| Death of close family member |  | Change in living conditions  |  |
| Personal injury or illness |  | Revision of personal habits |  |
| marriage |  | Trouble w/boss, teacher |  |
| Fired from job |  | Change in work hours or conditions  |  |
| Marriage/ similar reconciliation  |  |  Change in residence |  |
| Retirement  |  | Change in recreation  |  |
| Change in health of family member |  | Change in religious activities |  |
| Pregnancy  |  | Change in social activities  |  |
| Addition to family |  | Change in sleeping habits |  |
| Business readjustment  |  | Change in family get-togethers |  |
| Change in financial state |  | Stressful experience of holidays |  |
| Death of close friend |  | Abortion (yourself if female, your spouse, girlfriend if male) |  |
| Change in line or work |  | Other (specify) |  |
| Foreclosure of mortgage |  |  |  |
| Change in responsibilities at work |  |  |  |