

Client ID # _____

Date of Administration: _____

RECOVERY

CLIENT SELF-ADMINISTERED

Quality of Life

Thinking about your own life and personal circumstances, how satisfied are you with your life as a whole?

- ☐ 0 – No satisfaction at all
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 – Completely satisfied