



Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Disqualifiers from research findings:**

Put a check by any that you think may be present

- |  |   |
|--|---|
| <input type="checkbox"/> Hostility                 | <input type="checkbox"/> Manipulative                     |
| <input type="checkbox"/> Bitterness                | <input type="checkbox"/> Reactive thinker                 |
| <input type="checkbox"/> Selfishness               | <input type="checkbox"/> Emotionally unstable             |
| <input type="checkbox"/> Rigid/uncompromising      | <input type="checkbox"/> Overly sensitive                 |
| <input type="checkbox"/> Tactless                  | <input type="checkbox"/> Excessive dependency             |
| <input type="checkbox"/> Egotistical               | <input type="checkbox"/> Severe psychological disorders   |
| <input type="checkbox"/> Controlling               | <input type="checkbox"/> Uncontrolled anger               |
| <input type="checkbox"/> Dishonest                 | <input type="checkbox"/> Habitually critical              |
| <input type="checkbox"/> Cruel                     | <input type="checkbox"/> Obsessive or compulsive behavior |
| <input type="checkbox"/> Poor communication skills |   |

**Your Personally-Determined Disqualifiers:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_