



| <b>SLEEP JOURNAL</b> | <b>SUNDAY</b> | <b>MONDAY</b> | <b>TUESDAY</b> | <b>WEDNESDAY</b> | <b>THURSDAY</b> | <b>FRIDAY</b> | <b>SATURDAY</b> |
|----------------------|---------------|---------------|----------------|------------------|-----------------|---------------|-----------------|
|----------------------|---------------|---------------|----------------|------------------|-----------------|---------------|-----------------|

## COMPLETE IN THE MORNING (A.M.)

|                                      |  |  |  |  |  |  |  |
|--------------------------------------|--|--|--|--|--|--|--|
| I WENT TO BED LAST NIGHT AT ( TIME)  |  |  |  |  |  |  |  |
| I GOT UP THIS MORNING AT ( TIME)     |  |  |  |  |  |  |  |
| I SLEPT FOR A TOTAL OF ( HOURS)      |  |  |  |  |  |  |  |
| I WOKE UP DURING THE NIGHT (# TIMES) |  |  |  |  |  |  |  |

## COMPLETE IN THE EVENING (P.M.)

|                                       |  |  |  |  |  |  |  |
|---------------------------------------|--|--|--|--|--|--|--|
| NUMBER OF CAFFINATED DRINKS TODAY     |  |  |  |  |  |  |  |
| TIME OF LAST CAFFINATED DRINK         |  |  |  |  |  |  |  |
| EXERCISE COMPLETED TODAY (MINUTES)    |  |  |  |  |  |  |  |
| WHAT I DID IN THE HOUR BEFORE I SLEEP |  |  |  |  |  |  |  |
| MOOD TODAY (0-NOT SO GOOD -10 GREAT!) |  |  |  |  |  |  |  |

