SLEEP DIARY PART - I

Use this sleep diary to discover your patterns of sleep and how it affects you. It is best that you fill out part of it first thing in the morning. The last 3 questions are best completed at the end of your day.

DAY 1 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 2 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 3 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 4 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 5 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 6 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

DAY 7 S M T W T F S Total hours of Sleep last Night:

Time It took to fall asleep hr. Min.

I woke up Time during the night

I woke up feeling ☐ Groggy ☐ Somwhat refreshed ☐ Rested & refreshed

My next day function was ☐ Tired ☐ Slow, but okay ☐ Energetic

I exercised min. today at

I last consumed ☐ Alcohol at ☐ Caffeine at ☐ Nicotine at

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