|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
| **Things I did to relax before bed** |  |  |  |  |  |  |  |
| **Time I turned off the light and got into bed** |  |  |  |  |  |  |  |
| **Time I fell asleep (estimated)** |  |  |  |  |  |  |  |
| **Time I woke up** |  |  |  |  |  |  |  |
| **Time I got out of bed** |  |  |  |  |  |  |  |
| **How restful was my sleep? (0-10)** |  |  |  |  |  |  |  |
| **How awake do I feel in the morning? (0-10)** |  |  |  |  |  |  |  |
| **Did I have any bad dreams/nightmares?** |  |  |  |  |  |  |  |
| **Comments/reasons for a good or bad night’s sleep** |  |  |  |  |  |  |  |