

How Do You Spend Your Week?							
Hours left in each day:	_____	_____	_____	_____	_____	_____	_____
Daily Activities:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Sleeping:							
Personal Care/Grooming:							
Meal Preparation/Eating/Clean-up:							
Family Commitments:							
Socializing/Entertainment (with friends):							
Relaxing (alone):							
Exercise/Sports:							
Transportation (work, school, etc):							
Work:							
Classes/Studying:							
Other _____:							
Other _____:							