Sleep Log

Name:

Entry 1	Date:	
Time I went to sleep:		Time I woke up:
Total hours of sleep		Quality of sleep (1-10):
Notes on sleep quality and a	any disturbances:	
Bedtime routine:		
Factors that may have affect	ted my sleep:	
How I felt upon waking up:		
Notes on daytime energy lev	vels or any other observations	:

Entry 2	Date:	
Time I went to sleep:		Time I woke up:
Total hours of sleep		Quality of sleep (1-10):
Notes on sleep quality and any disturbances:		

Bedtime routine:				
Factors that may have affected my sleep:				
How I felt upon waking up:				
Notes on daytime energy lev	els or any other observations	:		
Entry 2	Date:			
Entry 3 Time I went to sleep:	Date:	Time I woke up:		
		Quality of sleep (1-10):		
Total hours of sleep	. P.I. d	Quality of Sieep (1-10).		
Notes on sleep quality and a	iny disturbances:			
Bedtime routine:				
Factors that may have affected my sleep:				
How I felt upon waking up:				
Notes on daytime energy levels or any other observations:				

Entry 4	Date:	
Time I went to sleep:		Time I woke up:
Total hours of sleep		Quality of sleep (1-10):
Notes on sleep quality and a	nny disturbances:	
Bedtime routine:		
Factors that may have affected my sleep:		
How I felt upon waking up:		
Notes on daytime energy levels or any other observations:		
Entry 5	Date:	
Time I went to sleep:		Time I woke up:

Time I went to sleep:	Time I woke up:
Total hours of sleep	Quality of sleep (1-10):
Notes on sleep quality and any disturbances:	
Bedtime routine:	

Factors that may have affected my sleep:
How I felt upon waking up:
Notes on daytime energy levels or any other observations: