# Sleep Log

Name: _____

## ENTRY 1

Entry 1 Date: _____ dd / mm / yyyy

Time I went to sleep: _____

Time I woke up: _____

Total hours of sleep: _____

Quality of sleep (1-10)

1 2 3 4 5 6 7 8 9 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

## ENTRY 2

Entry 2 Date: _____ dd / mm / yyyy

Time I went to sleep: _____

Time I woke up: _____

Total hours of sleep: _____

Quality of sleep (1-10)

1 2 3 4 5 6 7 8 9 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

## ENTRY 3

Entry 3 Date: _____ dd / mm / yyyy

Time I went to sleep: _____

Time I woke up: _____

Total hours of sleep: _____

Quality of sleep (1-10)

1 2 3 4 5 6 7 8 9 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

## ENTRY 4

Entry 4 Date: _____ dd / mm / yyyy

Time I went to sleep: _____

Time I woke up: _____

Total hours of sleep: _____

Quality of sleep (1-10)

1 2 3 4 5 6 7 8 9 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

## ENTRY 5

Entry 5 Date: _____ dd / mm / yyyy

Time I went to sleep: _____

Time I woke up: _____

Total hours of sleep: _____

Quality of sleep (1-10)

1 2 3 4 5 6 7 8 9 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