

SLEEP CHART

Name:

Date:

Instructions:

- 1) For each hour, place check mark in either "awake" or "asleep" box. For best use, record the observation at the same time for each hour (e.g., record at 8:15, 9:15, 10:15, etc.)
- 2) If the "awake" box is checked, note what the person was doing while awake. Provide *brief* description in the "activity" box
- 3) Place initials of staff name recording the observation in "initials" box

TIME	AWAKE	ASLEEP	ACTIVITY (if awake)	Initials
12:00 am				
1:00 am				
2:00 am				
3:00 am				
4:00 am				
5:00 am				
6:00 am				
7:00 am				
8:00 am				
9:00 am				
10:00 am				
11:00 am				
12:00 pm				
1:00 pm				
2:00 pm				
3:00 pm				
4:00 pm				
5:00 pm				
6:00 pm				
7:00 pm				
8:00 pm				
9:00 pm				
10:00 pm				
11:00 pm				