

Time Log

Last 4 digits of Student ID _____

Gender: Male Female

Class Level: Freshmen Sophomore Junior Senior

Please record the total number of minutes you engage in the following categories.

Dates (write in):	Employment	Family	Social (non-family)	Personal/Self	School-related	Other
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						
TOTALS						

Write here any significant or unusual event that affected your time in these activities for this week:

Definitions:

Employment: any work or activity, whether full- or part-time, self-employed or for another person or company, where you receive compensation

Family: activities related to your immediate or extended relatives

Social (non-family): activities related to spending time with friends or peers, whom you are not related to, that is not in the context of work or school

Personal/Self: activities related to things you do for yourself that do not involve others (e.g., exercising, getting a massage, taking a walk, reading a book)

School-related: activities outside of the class, related to studying, reading, writing papers, completing homework, or preparing for classes.

Other: Any other activities that do not belong in the other categories. This can include club activities, professional development, etc.

****Please do not include eating, sleeping, grooming, or household chores and errands in any of the categories.