

# Your Time Map



Real Life. Medicine. Miracles.

For each activity, estimate or record the number of hours you spend each day. If you can think of an activity not listed, enter it in the Other Activities spaces provided.

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>Work</b>						
Commuting						
Preparation						
On the job						
Worrying						
<b>Daily Tasks</b>						
Errands						
Grooming						
Cooking						
Cleaning						
Laundry						
Chores						
<b>Fun/Adventure/Leisure</b>						
Hobbies						
Reading						
Daydreaming						
<b>Relationships</b>						
Being with friends						
Being with family						
Being with children						
Being with partner						
<b>Entertainment</b>						
Watching TV						
Other entertainment						
Reading						
<b>Responsibilities</b>						
Child care						
Shopping						
Paying bills						
<b>Emotional/Physical Health</b>						
Religious/spiritual practices						
Exercise						
Relaxing/resting						
Being alone						
Sleeping						
Learning						
Worrying						
Creative thinking						
Writing, painting, etc.						
Studying						
Traveling						
<b>Service/Contributions to Others</b>						
Volunteering						
Caretaking						
<b>Other Activities</b>						