### Monthly Sleep Chart

**Individual:**

|   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 7:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6:00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6:30 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Directions:**

- If this individual is awake, put a dot in the box.
- If this individual is sleeping, shade in the entire box.

**Outreach Services of Indiana**

**OR-FN-HS-MS-54(11-9-09)**