



Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Time Management: How Do You Spend Your Time?

Record your activities for each listed time.

2:00 – 2:30 PM	
2:30 – 3:00 PM	
3:00 – 3:30 PM	
3:30 – 4:00 PM	
4:00 – 4:30 PM	
4:30 – 5:00 PM	
5:00 – 5:30 PM	
5:30 – 6:00 PM	
6:00 – 6:30 PM	
6:30 – 7:00 PM	
7:00 – 7:30 PM	
7:30 – 8:00 PM	
8:00 – 8:30 PM	
8:30 – 9:00 PM	
9:00 – 9:30 PM	