

MY SCHEDULE

NAME:

WEEK OF:

Chores + Responsibilities

	M	T	W	Th	F	S	S
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

My Day:

Morning	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
Day	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
Night	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____

My Week

MONDAY	FRIDAY
TUESDAY	SATURDAY
WEDNESDAY	SUNDAY
THURSDAY	GOAL THIS WEEK

NOTES: