

Sleep for Better Health, Resilience and Performance



Key: P=Parent, C=Child

Personal Questionnaire	Week	Weekend
1. What is the average time you go to sleep on weeknight's vs weekends?	P- C-	P- C-
2. What is the average time you wake on week morning's vs weekends?	P- C-	P- C-
3. What are the average hours of sleep you get per night on weeknights vs weekends?	P- C-	P- C-
4. If you have an afternoon nap, how long is that on a weekday vs the weekend?	P- C-	P- C-
5. Do you require an alarm or person to wake you on time on weekday mornings?	P-Circle YES or NO C-Circle YES or NO	
6. What do you spend your time doing most nights within 30mins of going to sleep?	P- C-	
7. Does the use of electronic devices for social media, work, homework, gaming etc impact your quantity or quality of sleep? This impact can be regarding ability to fall asleep and/ or hours of sleep	P-Circle YES or NO C-Circle YES or NO	
8. How do you feel within 30 minutes of waking on a 5 point scale where 1 is exhausted and 5 is refreshed?	P-1 2 3 4 5 C-1 2 3 4 5	
9. Do you feel you get enough sleep?	P-Circle YES or NO C-Circle YES or NO	
10. If not, what is the number one constraint stopping you getting the recommended hours of sleep?	P- C-	
11. Are you motivated to change this? If so what would be your No.1 motivator for you getting more sleep? For eg energy, mood, relationships, concentration at work/ school, academic or sports performance	P- C-	
12. What are 1-2 actions you aim to take in order to improve the quality and/ or quality of sleep you are getting?	P- C-	
13. What is the key insight you have learned from tonight?		