

Sleeping Habits Survey Template

All questions are optional. Follow each question's directions.
Write your answers to the open questions in the space provided.

Think about your sleep during the past seven days. Your main sleep period means your longest sleep in each 24-hour day, whether it happened at night or during the day. Every question is optional. This is a routine survey, not a medical assessment. Do not include diagnoses, medication details, names, or contact information.

1. During the past seven days, when did your main sleep period most often occur?

- ☐ Mostly at night
- ☐ Mostly during the day
- ☐ The timing changed substantially from day to day
- ☐ Sleep was split without one clearly longest period
- ☐ Prefer not to say

2. During the past seven days, how much did the start of your main sleep period vary from day to day?

- ☐ Usually within about 30 minutes
- ☐ Usually by more than 30 minutes to 1 hour
- ☐ Usually by more than 1 to 2 hours
- ☐ Usually by more than 2 hours
- ☐ No main sleep period or unable to estimate

3. During the past seven days, about how much actual sleep did you usually get in your main sleep period, excluding time awake?

- ☐ Less than 4 hours
- ☐ 4 to less than 6 hours
- ☐ 6 to less than 8 hours
- ☐ 8 to less than 10 hours
- ☐ 10 hours or more
- ☐ No main sleep period or unable to estimate

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4. On how many of the past seven days did you have enough time available for the sleep you wanted?

- ☐ 0 days
- ☐ 1–2 days
- ☐ 3–4 days
- ☐ 5–6 days
- ☐ 7 days
- ☐ Unable to judge

5. On how many of the past seven days did you nap or sleep outside your main sleep period?

- ☐ 0 days
- ☐ 1–2 days
- ☐ 3–4 days
- ☐ 5–6 days
- ☐ 7 days
- ☐ No main sleep period or unable to estimate

6. What most affected your opportunity to follow the sleep schedule you wanted during the past seven days?

- ☐ Work or study schedule
- ☐ Caregiving responsibilities
- ☐ Noise, light, or the sleeping space
- ☐ Social or leisure plans
- ☐ Travel or a change in routine
- ☐ Another factor
- ☐ Nothing in particular
- ☐ Prefer not to say

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7. What is one practical change, if any, that would make your preferred sleep schedule easier to follow? Please leave out medical or personal details.
