

Circadian Reinforcement Therapy registration: CHRONO schedule

 Had a meal: Breakfast, lunch or dinner	 Been seeing somebody: Seen friends, family or other for more than 5 minutes	 Been physically active: Exercised for more than 5 minutes	 Been out in the daylight: In daylight for more than 5 minutes
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What have you been doing today? Please mark all activities that you have been doing in the morning, afternoon and evening														
Week nb.:	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
From wake-up till noon														
														
From noon till 6 PM														
														
From 6 PM till sleep-onset														
														