



TRANSFORM YOUR SLEEP IN 30 DAYS

30-DAY SLEEP REVOLUTION TRACKER

Transform Your Sleep in One Month

Track your progress from sleepless nights to perfect sleep



Daily Progress Tracking

Monitor sleep quality, energy levels, and technique effectiveness



Pattern Recognition

Identify what works best for your unique sleep personality



Weekly Assessments

Adjust techniques based on data-driven insights



Graduation Certificate

Celebrate your transformation with official completion recognition

How to Use This Tracker



Daily Tracking Takes Just 2 Minutes

Morning Entries (within 30 minutes of waking): Sleep quality, time to fall asleep, wake-ups, energy, mood

Evening Entries (before bed): Techniques used, stress level, caffeine intake, screen time, bedroom temperature

Weekly Reviews



Identify patterns and trends in your sleep data



Celebrate improvements, no matter how small



Adjust techniques based on what's working



Set specific goals for the upcoming week

Your 30-Day Journey

WEEK 1

Baseline &
Foundation

WEEK 2

Optimization &
Refinement

WEEK 3

Consistency &
Mastery

WEEK 4

Integration &
Sustainability

WEEK 1: BASELINE & FOUNDATION

Goals: Establish consistent bedtime routine • Learn 4-7-8 breathing • Optimize bedroom environment • Complete first week tracking

1

DAY 1 - BASELINE ASSESSMENT

MORNING REFLECTION

Sleep Quality

1

2

3

4

5

6

7

8

9

10

Time to Fall Asleep

Night Wake-ups

Morning Energy

1

2

3

4

5

6

7

8

9

10

What kept you awake last night?

☐ Racing thoughts

☐ Physical discomfort

☐ Noise

☐ Temperature

☐ Anxiety/stress

☐ Pain

☐ Bathroom needs

Other factors:

EVENING PREPARATION

Parameter	Your Entry
Bedtime Goal	<input type="text"/>
Techniques to Try Tonight	<input type="text"/>
Bedroom Temperature	<input type="text"/>
Caffeine After 2 PM?	<input type="text"/> Yes <input type="text"/> No
Screen Time (Last 2 Hours)	<input type="text"/>
Current Stress Level (1-10)	<input type="text"/>

NOTES & OBSERVATIONS:

Week 1 Review & Assessment

Your Week 1 Progress

Average Sleep Quality ___/10

Average Time to Fall Asleep ___ minutes

Technique Consistency ___/7 nights

BEST & WORST NIGHTS

BEST NIGHT THIS WEEK

Date:

Sleep Quality:

What made it great:

MOST CHALLENGING NIGHT

Date:

Sleep Quality:

What went wrong:

TECHNIQUE EFFECTIVENESS RANKING

1.

Rate:

2.

Rate:

3.

Rate:



Patterns Noticed

☐

Better sleep on certain days of week

☐

Caffeine clearly affects sleep

☐

Stress level correlates with sleep quality

☐

Temperature makes a difference

☐

Screen time impacts sleep

Other patterns:

30-Day Final Assessment



Congratulations!

You've completed 30 days of dedicated sleep improvement. Time to measure your transformation!

| Transformation Summary

BEFORE (Day 1)

Average
Sleep Quality:

Fall Asleep
Time:

Night Wake-
ups:

Morning
Energy:

AFTER (Day 30)

Average
Sleep Quality:

Fall Asleep
Time:

Night Wake-
ups:

Current Sleep
Confidence:



Total Improvement

Sleep Quality: +

points

Fall Asleep Time: -

minutes

Wake-ups: -

per night

Energy: +

points



GRADUATION CERTIFICATE

I,

, have successfully completed the 30-Day Sleep
Revolution program.

I have gained the knowledge, tools, and confidence to
maintain healthy sleep for life. I am committed to
prioritizing my sleep and using these techniques
consistently.

Signature

Date

Witnessed by:

Welcome to Your New Life of Perfect Sleep! 🌙✨