



Please complete the questionnaire to tell us how your **LIFE** is currently affected by your **SLEEP** and how you would like to see it improve.

If you feel that your life is not affected by the way you sleep please tick here

**PART 1: List the areas**

In your own words, write down the 3 most important things that are affected because of your poor sleep.

**Part 2: Ranking**

Now rank each box (1,2,3) based on how concerned you are by it i.e. **1** = the thing that concerns you most, **2**= the next area that concerns you most, and **3** = the final area that concerns you least out of the three.

**PART 3: Ratings**

Now give each of these areas a score, depending upon how bothered you were by it, in the past **two weeks**. Place a vertical mark through the line ( + ) wherever your personal rating falls

*Here is an example:*

|                 |                 |       |
|-----------------|-----------------|-------|
| <i>Very</i>     | <i>Not</i>      |       |
| <i>bothered</i> | <i>bothered</i> |       |
| _____           | _____           | _____ |

Very  
bothered

\_\_\_\_\_

Not  
bothered

Very  
bothered

\_\_\_\_\_

Not  
bothered

Very  
bothered

\_\_\_\_\_

Not  
bothered

**PART 4: Spend**

Finally, imagine you had **£60** to spend trying to get rid of these problems. Divide up your **£60** any way you like. You can spread it around or spend it all on just one or two things.