OPTION 9PARENTING RESPONSIBILITIES					STUDENT
NAME				HOUR	
		TIME S	URVEY		
How do you spend your time outside of school? In the space below, fill in your daily activities for one week. Write down how much time you spend on each activity. Try to be as accurate as possible. Categories might include family time, sleeping, TV, friends/entertainment, eating, working, school/homework, other.					
ACTIVITY:					
SUNDAY					
MONDAY					

Using the information above, answer the following questions.

TUESDAY

WEDNESDAY

THURSDAY

SATURDAY

FRIDAY

- 1. Is there anything else you would like to do that you don't have time for? If so, what is it?
- 2. If you could change anything in your current schedule, what would it be? Why?
- 3. At present, do you have the time to raise a child and still have time to accomplish other things that are important to you? Why or why not?
- 4. What kind of changes would you need to make in order to be able to raise a child?
- 5. Would these changes be easier to make at another point in your life? Why or why not?