

IS SKIMPING ON YOUR ZZZ's HURTING YOUR HEALTH?

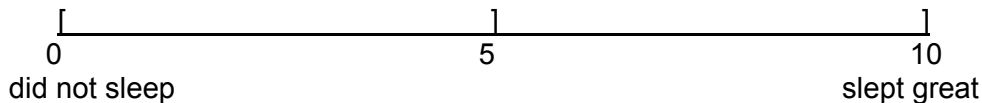
A. Sleep Survey

These questions will help you assess if you are putting your health at risk. Please check all that apply to you.

1. I sleep through my alarm in the morning. _____
2. I have a hard time keeping my eyes open in class. _____
3. I need caffeine to help me wake up in the morning. _____
4. I need caffeine to help me stay awake during the day. _____
5. I often have a hard time focusing. _____
6. I am often grumpy and or groggy when I wake up in the morning. _____
7. I have headaches when I don't sleep well. _____
8. I am over emotional, I cry at weird stuff. _____
9. I often sleep in until noon or later on the weekends. _____
10. I wake up often during the night. _____

B. Analyze Your Sleep Habits

1. Record how many hours of sleep you got last night _____
2. Rate the quality of sleep you received last night- indicate with a colored pencil mark on the scale below.



3. List at least 3 factors that affect how much sleep you get during a typical school week.
 - 1) _____
 - 2) _____
 - 3) _____
4. Do you feel that the amount of sleep you get affects your academic performance?
5. Do you feel that you may be sleep deprived?

C. Hypothesize: The Effects of Sleep Deprivation - Hypothesize and list at least 5 predictions of sleep-related health problems that you feel may occur if sleep deprived.

1. _____
2. _____
3. _____
4. _____
5. _____

After watching the video *Negative Effects of Sleep Deprivation*, circle each of the predictions that you have hypothesized correctly.