

Daily Schedule

DAY:

6:00	
7:00	
8:00	
9:00	
10:00	
11:00	
12:00	
13:00	
14:00	
15:00	
16:00	
17:00	
18:00	
19:00	
20:00	
21:00	

Weekly Planner

Dates:

Monday

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Tuesday

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Wednesday

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Thursday

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Friday

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Saturday & Sunday

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Cleaning

CHECKLIST

DAILY

- | | |
|---|--|
| <input type="checkbox"/> Make Bed | <input type="checkbox"/> Sweep Kitchen Floors |
| <input type="checkbox"/> Wash Dishes | <input type="checkbox"/> Clean Bathroom |
| <input type="checkbox"/> Wipe Kitchen Table | <input type="checkbox"/> Brush Shower Walls |
| <input type="checkbox"/> Do Laundry | <input type="checkbox"/> Sanitize Kitchen & Bathroom |

WEEKLY

- | | |
|--|---|
| <input type="checkbox"/> Clean Mirrors | <input type="checkbox"/> Do Laundry |
| <input type="checkbox"/> Clean Windows | <input type="checkbox"/> Garbage Disposal |
| <input type="checkbox"/> Dust Furnitures | <input type="checkbox"/> Clean Oven/Microwave |
| <input type="checkbox"/> Change Beddings | <input type="checkbox"/> Mop floors |

MONTHLY

- | | |
|--|--|
| <input type="checkbox"/> Clean Storages | <input type="checkbox"/> Wipe Kitchen Cabinets |
| <input type="checkbox"/> Clean Fridge | <input type="checkbox"/> Scrub Stove & Burners |
| <input type="checkbox"/> Clean Rooms | <input type="checkbox"/> Declutter Cabinets |
| <input type="checkbox"/> Change Beddings | <input type="checkbox"/> Vacuum upholstery |

YEARLY

- | | |
|---|--|
| <input type="checkbox"/> Empty Pantry | <input type="checkbox"/> Deep Clean Windows |
| <input type="checkbox"/> Empty Shelves | <input type="checkbox"/> Clear out gutters |
| <input type="checkbox"/> Deep clean carpets | <input type="checkbox"/> Deep Clean upholstery |
| <input type="checkbox"/> Dust lampshades | <input type="checkbox"/> Aircon Cleaning |

Cleaning

CHECKLIST

DAILY	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
WEEKLY	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
MONTHLY	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
YEARLY	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Meal Plan

	BREAKFAST	LUNCH	DINNER
MON			
TUE			
WED			
THU			
FRI			
SAT			
SUN			

Meal Plan

Monday

Breakfast :

Lunch :

Dinner :

Tuesday

Breakfast :

Lunch :

Dinner :

Wednesday

Breakfast :

Lunch :

Dinner :

Thursday

Breakfast :

Lunch :

Dinner :

Friday

Breakfast :

Lunch :

Dinner :

Saturday

Breakfast :

Lunch :

Dinner :

Sunday

Breakfast :

Lunch :

Dinner :

Shopping List

Daily Checklist

Before School

M T W Th F

Brush Teeth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put Pajamas Away	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make Bed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breakfast Dishes in Sink	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pack Snack & Water Bottle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

After School

M T W Th F

Unpack Backpack & Put Away	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put Away Lunch & Water Bottle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wash Hands	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do Homework + Read for 20 Min	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Play Outside for 30 Min	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Before Bed

M T W Th F

Brush Teeth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put Pajamas On	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put Dirty Clothes in Hamper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tidy Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pick Out Clothes for Tomorrow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>