**Practice Sheet Name: Date:**

|  |
| --- |
| **Targets for the week (To be filled in by tutor)** |

**Monday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Tuesday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Wednesday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Thursday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Friday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Saturday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |

**Sunday**

|  |  |
| --- | --- |
| Number of minutes spent practising. |  |
| What was practiced and how many times. |  |
| What do you feel you achieved today? |  |