

Date:

Total time:

GOAL:

HOURS

MIN

SUBJECT	TOPIC/PAGE	STUDY TIME		REMARK
		h	min	
		h	min	
		h	min	
		h	min	
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		h	min	
		h	min	
		h	min	
		h	min	
		h	min	
		h	min	

NOTES:

EXAM PREPARATION TIME TABLE

WEEK NO: DATE: STUDY TIME TO

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

SUNDAY

SUBJECT NAME

EXAM DATES