# EXAM ORGANIZER

PLAN • PREPARE • PERFORM

NAME: _____

STUDENT ID: _____

COURSE / PROGRAM: _____

ACADEMIC YEAR: _____

## EXAM OVERVIEW

| EXAM / SUBJECT | DATE | TIME | LOCATION | DURATION | WEIGHTAGE (%) | NOTES |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
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## STUDY PLAN

| SUBJECT / EXAM | TOPICS TO COVER | PLANNED STUDY SCHEDULE | | |
|---|---|---|---|---|
| | | START DATE | END DATE | TOTAL HOURS |
| | | | | |
| | | | | |
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## EXAM CHECKLIST

- ☐ Syllabus reviewed
- ☐ Past papers practiced
- ☐ Notes organized
- ☐ Important formulas / concepts summarized
- ☐ Study timetable created
- ☐ Mock test attempted
- ☐ Weak areas identified
- ☐ Revision completed
- ☐ Exam day plan ready
- ☐ Other: _____

## REVISION TRACKER

| SUBJECT | 1ST REVISION ✓ | 2ND REVISION ✓ | FINAL REVISION ✓ | CONFIDENCE LEVEL (1–5) | NOTES |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

## RESOURCES TO USE

- _____
- _____
- _____
- _____
- _____
- _____

## EXAM DAY PLAN

EXAM: _____ DATE: _____

LOCATION: _____ REPORTING TIME: _____

THINGS TO CARRY

☐ Admit Card ☐ ID Proof ☐ Stationery ☐ Calculator ☐ Water Bottle ☐ Others: _____

### EXAM DAY SCHEDULE

Wake up time: _____

Light exercise / walk: _____

Breakfast time: _____

Reach exam center by: _____

Other (if any): _____

### NOTES / AFFIRMATION

## FOCUS & MOTIVATION

My goal for these exams:

_____

_____

_____

Why this is important to me:

_____

_____

_____

My motivation / reminder:

_____

_____

_____

*Stay focused. Stay consistent. Believe in yourself. Success is the result of preparation!* ★