



TEST PREPARATION TRACKER

PLAN SMART. STUDY FOCUSED. PERFORM YOUR BEST.



NAME: _____

TEST / EXAM: _____



COURSE: _____

DATE: ____ / ____ / ____

TOPIC / CHAPTER 	KEY CONCEPTS TO STUDY 	STUDY PLAN (What & When) 	TARGET DATE 	PLANNED TIME (HRS) 	ACTUAL TIME (HRS) 	COMPLETED
1.			__/__/__	__ h __ m	__ h __ m	☐
2.			__/__/__	__ h __ m	__ h __ m	☐
3.			__/__/__	__ h __ m	__ h __ m	☐
4.			__/__/__	__ h __ m	__ h __ m	☐
5.			__/__/__	__ h __ m	__ h __ m	☐
6.			__/__/__	__ h __ m	__ h __ m	☐
7.			__/__/__	__ h __ m	__ h __ m	☐
8.			__/__/__	__ h __ m	__ h __ m	☐
9.			__/__/__	__ h __ m	__ h __ m	☐
10.			__/__/__	__ h __ m	__ h __ m	☐
TOTAL STUDY TIME				__ h __ m	__ h __ m	

STUDY GOALS



- ☐ Understand all key concepts
- ☐ Complete practice questions
- ☐ Review and summarize notes
- ☐ Identify and fix weak areas
- ☐ Score my best!

MY TARGET SCORE: _____

WEEKLY STUDY PLAN



DAY	PLANNED STUDY TIME
MON	__ h __ m
TUE	__ h __ m
WED	__ h __ m
THU	__ h __ m
FRI	__ h __ m
SAT	__ h __ m
SUN	__ h __ m

DAILY CHECKLIST



- ☐ Reviewed lecture notes
- ☐ Studied key concepts
- ☐ Solved practice questions
- ☐ Analyzed mistakes
- ☐ Took short breaks
- ☐ Stayed focused
- ☐ Got enough sleep

PROGRESS TRACKER



How prepared do I feel?



NOTES / IMPORTANT REMINDERS





CONSISTENCY TODAY. SUCCESS TOMORROW.

