

# PRACTICE LOG

Week of: \_\_\_\_\_

Student: \_\_\_\_\_

Instrument: \_\_\_\_\_

DAY	MINUTES	FOCUS AREA / SPECIFIC EXERCISES
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		
<b>TOTAL</b>		Teacher/Parent Initials: _____

## THIS WEEK'S ASSIGNMENTS

## TECHNIQUE & SCALES