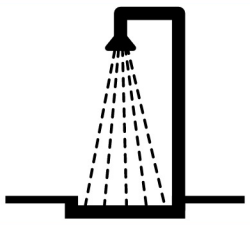
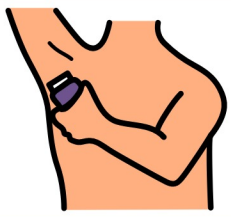
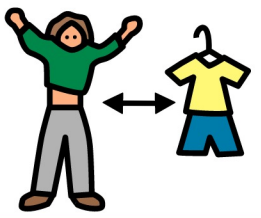
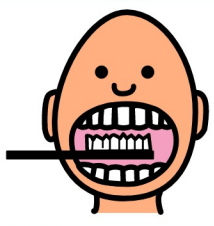
Personal Hygiene

Name:_____

Task	Mon	Tue	Wed	Thu	Fri
 Shower					
 Wash face					
 Wash hands					
 Deodorant					
 Clean underwear and socks					
 Change clothes					
 Brush hair					
 Have a healthy breakfast					
 Brush teeth in morning					