New Hampshire Department of Corrections
Office on Citizen Involvement and Volunteers

QUARTERLY ATTENDANCE REPORT

Reporting for the quarter checked below				
Quarter	O Jan 1 – March 31	O Apr 1 – June 30	O July 1 – Sept 30	O Oct 1 – Dec 31
Year				

Please include state prison, state correctional facility, and community-based voluntary services for criminal offenders

DATE OF ACTIVITY, EVENT OR SERVICE	NUMBER OF HOURS	NATURE OF VOLUNTARY ACTIVITY OR SERVICE	LOCATION OF SERVICES	NUMBER OF DOC CLIENTS*			
				INCARCERATED	PAROLEE	PROBATIONER	FAMILY

* only with clients as authorized

(Please Print)

Name _____

Address _____

_____

Phone _____ Date Report Completed _____

Please submit report to NH DOC Volunteer Coordinator **within 15 DAYS** following the end of the reported quarter;

Prison Mail System	US Postal Service	Email/Phone	Fax
c/o Volunteer Coordinator @ Headquarters	c/o NH State Prison Volunteer Activities PO Box 1806, Concord, NH 03302-1806	Mary.hagler@nhdoc.state.nh.us 603-271-8405	(603) 271-5643