

	<h1>Bureau of Corrections</h1>	Document Reference Code NBP-PR-010-F105	
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RVO ACCOMPLISHMENT REPORT		Page 1 of 1	

RELIGIOUS GUIDANCE ADVISORY GROUP – CHAPLAINCY SERVICE

(Institutional Chaplaincy)
Accomplishment Report for the Month of _____

The Chief Chaplain

SIR:

This is to respectfully submit our monthly summary accomplishment report for your information and guidance:

	NO. OF SERVICE	NO. OF INMATE	PARTICIPANTS PERSONNEL
1. WORSHIP ACTIVITIES:			
a. PRAYER (Mass, Bible Service, fellowship, etc.)	_____	_____	_____
b. MINISTERIAL (Baptism, Wedding, funeral, etc.)	_____	_____	_____
c. PARA-LITURGICAL (Devotion, Novenas, Processions, etc.)	_____	_____	_____
2. FORMATION ACTIVITIES:			
a. Catechetical	_____	_____	_____
b. Seminars/Conference	_____	_____	_____
c. Guidance/Counseling	_____	_____	_____
d. Others	_____	_____	_____
TOTAL	_____	_____	_____
3. FUND USED			
Bureau	P_____		
Voluntary	P_____		
4. OTHER SERVICES/ACTIVITIES UNDERTAKEN:	_____		
5. PROBLEMS ENCOUNTERED:	_____		
6. SUGGESTIONS/RECOMMENDATIONS:	_____		

CERTIFIED CORRECT:

RVO