

# Pro Bono Hours Reporting Form

The following NFPA Pro Bono Hours Reporting Form should be used by all paralegals who are NFPA members so that NFPA may record and report the number of hours paralegals have contributed to pro bono services to organizations such as the ABA. In addition, each NFPA member association will receive an annual pro bono report containing the number of hours reported by members of that association as well as a total number of hours paralegals within their state have contributed. Local associations may then report these hours to the state and local bar associations, highlighting the valuable contribution paralegals make to the delivery of pro bono legal services and to making access to justice a reality.

Please submit this Form quarterly to your association Pro Bono Chair or to your association President. The association Pro Bono Chairs or Presidents are then responsible for sending the Forms to the NFPA Pro Bono Region Mentors. Thank you!

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## NFPA Pro Bono Reporting Form for \_\_\_\_\_ (Year)

*The NFPA Model Code of Ethics and Professional Responsibility and Guidelines for Enforcement contains an ethical consideration that every paralegal should aspire annually to contribute 24 hours of pro bono services.*

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Fax:</b>	<b>E-mail:</b>
<b>1. Date volunteered:</b>	<b>1. Number of Hours:</b>	
<b>2. Date volunteered:</b>	<b>2. Number of Hours:</b>	
<b>3. Date volunteered:</b>	<b>3. Number of Hours:</b>	
<b>1. Agency Name:</b>		
<b>Supervisor Name:</b>		<b>Supervisor Phone:</b>
<b>2. Agency Name:</b>		
<b>Supervisor Name:</b>		<b>Supervisor Phone:</b>
<b>3. Agency Name:</b>		

<b>Supervisor Name:</b>	<b>Supervisor Phone:</b>
<b>1. Brief Description of work performed:</b>	
<b>2. Brief Description of work performed:</b>	
<b>3. Brief Description of work performed:</b>	
<b>Paralegal Association:</b>	

**I attest that I have completed the pro bono work described above and the information listed above is true and accurate to the best of my knowledge.**

**Signed:**

**Date:**

\_\_\_\_\_

(Attach additional sheet, if necessary)