



**South Carolina Department of Probation, Parole & Pardon Services**  
**Office of Victim Services - Register for Notification of Hearings**

---

Inmate's Name \_\_\_\_\_ SCDC # (if known) \_\_\_\_\_

Offense(s) \_\_\_\_\_

County \_\_\_\_\_ Date of Sentence \_\_\_\_\_

Sentence \_\_\_\_\_

Name of Person Requesting Notification \_\_\_\_\_

Your Relationship to Victim \_\_\_\_\_

Address \_\_\_\_\_ Home Phone # \_\_\_\_\_

\_\_\_\_\_ Work Phone # \_\_\_\_\_

\_\_\_\_\_ Cell Phone # \_\_\_\_\_

**I request to be notified of any parole hearing regarding the above named inmate. I understand that if my address and/or phone number changes, I am responsible for notifying the Office of Victim Services, SCDPPPS.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

*Mail this form to:*  
**Office of Victim Services**  
**S.C. Department of Probation, Parole & Pardon Services**  
**293 Greystone Blvd., Columbia, SC 29210**  
**P.O. Box 207, Columbia, SC 29202**

*If you have questions, call toll free:*  
**1-888-551-4118** or  
**(803) 734-9367 (in Columbia)**

***\*The S.C. Department of Corrections, a separate agency, will notify you in the event of escape or release on a community program, provided they have your notification request on file. Please contact SCDC Victim Services, at (803) 896-1733 or 1-800-835-0304 if you live outside the Columbia area, for more information or to answer questions concerning this matter.***