

INMATE BOOT CAMP PROGRAM  
STATEMENT OF VOLUNTARY WITHDRAWAL FROM 90-DAY PROGRAM

\_\_\_\_\_  
FACILITY

Inmate: \_\_\_\_\_ DATE: \_\_\_\_\_

STATE ID# \_\_\_\_\_ DOB: \_\_\_\_\_

I, the above named inmate, have made the decision to withdraw from the  
90-day Inmate Boot Camp Program for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Inmate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counselor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Warden/Designee

\_\_\_\_\_  
Date

RETENTION SCHEDULE:

Upon completion of this form, it will be placed in inmate/  
probationer's case history file.