



**Georgia Department of Corrections
Moral Reconciliation Therapy Workbook
How to Escape Your Prison
Receipt**

Facilitator:	Site:
Participant Name/ID#:	Date:

On the above noted date, the participant received the "How to Escape Your Prison" workbook required for participation and completion of the MRT group.

The participant understands that, in the event the workbook cannot be produced or is lost, he/she is responsible for purchasing a replacement. Losing a workbook does not exclude an offender from receiving necessary sanctions. Participants will not be allowed in groups without a workbook.

Participant Signature: _____ Date: _____

Facilitator Name (Print): _____ Date: _____

Facilitator Signature: _____ Date: _____

Re-Issue Date (if necessary): _____

Re-Issue Participant Signature: _____

Facilitator Name (Print): _____

Facilitator Signature: _____