

# **APPENDIX D**

Juror Questionnaires

**ALABAMA**

1

**Recommended Uniform Juror Questionnaire**

SAMPLE FORM 56.  
**RECOMMENDED UNIFORM  
JUROR QUESTIONNAIRE**

*This questionnaire is for use only by the judge and lawyers in selecting a jury. It is not public information. If you need additional space to answer a question, attach additional sheets and number your answers to correspond to the questions.*

1. Juror name/number: \_\_\_\_\_
  
2. Place of birth: \_\_\_\_\_ Age \_\_\_\_\_ Sex: ( ) Male ( ) Female
  
3. Race: ( ) Caucasian/White ( ) African-American/Black ( ) Hispanic ( ) Other \_\_\_\_\_
  
4. Do you: ( ) Own home ( ) Rent home ( ) Rent apartment ( ) Live with friend or relatives ( ) Other
  
5. What cities/states have you lived in during the past five years? \_\_\_\_\_  
\_\_\_\_\_
  
6. Marital status: ( ) Single ( ) Married ( ) Divorced ( ) Separated ( ) Widowed.  
If you are married: Spouse's employer: \_\_\_\_\_  
Number of years your spouse has worked there: \_\_\_\_\_  
Spouse's title and job responsibilities: \_\_\_\_\_  
Educational background of your spouse, including any degrees or certificates earned \_\_\_\_\_
  
7. Do you have children? ( ) Yes ( ) No. If yes, please complete the following:  

| <u>Age</u> | <u>Sex</u> | <u>School or occupation</u> | <u>Live with you?</u> | <u>Their level of education</u> |
|------------|------------|-----------------------------|-----------------------|---------------------------------|
| _____      | _____      | _____                       | _____                 | _____                           |
| _____      | _____      | _____                       | _____                 | _____                           |
| _____      | _____      | _____                       | _____                 | _____                           |
| _____      | _____      | _____                       | _____                 | _____                           |
  
8. Your level of education: Specify the highest grade you completed:  
(a) Elementary or high school (1-12) \_\_\_\_\_  
College (1-4 or 5+) \_\_\_\_\_  
(b) If college, what college, what degrees, and what was your major? \_\_\_\_\_  
\_\_\_\_\_  
(c) Have you ever taken any courses in law, law enforcement, criminology, or criminal justice? ( ) Yes ( ) No. If yes, what courses? \_\_\_\_\_
  
9. Your present employment status (check all that apply):( ) Full-time ( ) Part-time ( ) Retired ( ) Unemployed ( ) Student ( ) Homemaker





Defendant in a civil or criminal case.

24. Have you or anyone close to you ever sued or been sued in any type of lawsuit?

Yes  No. If yes, explain: \_\_\_\_\_

\_\_\_\_\_

25. Have you ever been to court for any other reason (excluding divorce or traffic cases)?

Yes  No. If yes, explain:

\_\_\_\_\_

26. Have you ever been arrested?  Yes  No

27. Have you, a close relative, or a close friend ever been convicted of a crime?

Yes  No

28. What newspaper(s) do you read regularly? \_\_\_\_\_

29. What TV news programs do you watch frequently? \_\_\_\_\_

30. How many hours of TV do you watch per week? \_\_\_\_\_

31. What radio programs do you listen to most? \_\_\_\_\_

32. Which do you find more interesting?  Local news  National news

33. To what periodicals or magazines do you subscribe? \_\_\_\_\_

\_\_\_\_\_

34. Of the books you have read, which three are your favorites? \_\_\_\_\_

\_\_\_\_\_

35. Please list your hobbies, spare-time activities, and outside interests: \_\_\_\_\_

\_\_\_\_\_

36. Are there bumper stickers on the vehicles that you drive or that your spouse drives?

Yes  No. If yes, what do they say? \_\_\_\_\_

37. In a group situation, once you have formed an opinion, do you usually:

Change your mind if a number of people have a different opinion?

Stand by your original opinion despite what others believe?

38. Do you have relatives or close personal friends who are judges, attorneys, or court personnel?  Yes  No. If yes, what are their names and relationship to you?

\_\_\_\_\_

39. Based on your experience, what is your opinion of lawyers?  Good  Fair  Poor

40. Do you have any medical problems (for example, problems with your vision or hearing) that may prevent you from serving as a juror? ( ) Yes ( ) No. If yes, explain:

\_\_\_\_\_

41. Do you have any ethical, religious, political, or other beliefs that may prevent you from serving as a juror? ( ) Yes ( ) No. If yes, explain: \_\_\_\_\_

\_\_\_\_\_

42. Is there any matter not covered by this questionnaire that could affect your ability to be a fair and impartial juror? ( ) Yes ( ) No. If yes, explain:

\_\_\_\_\_

\_\_\_\_\_

43. List any reason why you do not wish to serve or why you should not serve:

\_\_\_\_\_

44. Are you or is any member of your family in favor of limiting the rights of those accused of a crime so as to make it easier to convict? ( ) Yes ( ) No

45. In a criminal case, a defendant is presumed innocent until proven guilty based on the evidence.? Do you agree with that principle? ( ) Yes ( ) No. If no, why not?

\_\_\_\_\_

46. Have you or a close relative ever been the victim of a crime? ( ) Yes ( ) No. If yes, please describe:

\_\_\_\_\_

47. Have you or a close relative ever worked in a law enforcement-related job such as police, sheriff, state trooper, prison guard, or military police? ( ) Yes ( ) No. If yes, please describe: \_\_\_\_\_

48. Have you taken any courses or had any training in medicine or other health-care field? ( ) Yes ( ) No. If yes, please explain:

\_\_\_\_\_

\_\_\_\_\_

ANSWERS TO QUESTIONS 49 - 54 ARE OPTIONAL

49. Do you belong to a church or otherwise have any religious affiliation? ( ) Yes ( ) No. If yes, please specify: \_\_\_\_\_

50. How often do you attend religious services? ( ) Regularly ( ) Occasionally ( ) Never

51. Do you hold a special position in your religious organization? ( ) Yes ( ) No

52. What is your political party preference? \_\_\_\_\_

53. Are you or is any member of your family a member of any victims rights organization?  Yes  No. Of any anti-crime group or other similar organization?  Yes  No. Of any anti-weapons or gun-control group?  Yes  No.

54. Have you ever actively participated in a political campaign?  Yes  No. If yes,  Democrat?  Republican?  Other \_\_\_\_\_

**ALASKA**

2

**Anchorage – Pre-Trial Check-In (Juror  
Questionnaire**

# Pre-Trial Check-In (Juror Questionnaire)

Name JUROR, TEST

Summons # 434354

Service # 734

Court Anchorage

Term

January 2, 2022

1. What is your age and birthplace? \_\_\_\_\_
  2. How long have you lived in your community? \_\_\_\_\_
  3. What is your occupation and current employer?  
\_\_\_\_\_
  4. What is your spouse or household partner's name and occupation?  
\_\_\_\_\_
  5. How many children do you have and what are their ages? \_\_\_\_\_
  6. What are your hobbies and interests?  
\_\_\_\_\_
  7. Have you ever served on a jury?  Yes  No
    - a. If yes, when? \_\_\_\_\_
    - b. What kind of case? \_\_\_\_\_
  8. Have you or any family member been involved with a court case? (i.e. plaintiff, defendant, witness)  Yes  No
  9. Have you or any family member been a victim of a crime?  Yes  No
    - a. If yes, when and what kind of crime? \_\_\_\_\_
  10. Based on your personal history, is there any reason you should not serve on a case that involves driving under the influence (DUI)? \_\_\_\_\_  
\_\_\_\_\_
  11. Based on your personal history, is there any reason you should not serve on a case that involves domestic violence? \_\_\_\_\_  
\_\_\_\_\_
  12. Are you related to, or close friends with, anyone involved in the justice system or law enforcement? \_\_\_\_\_
  13. Are there any reasons why you should not serve on this jury?  
\_\_\_\_\_  
\_\_\_\_\_
  14. Please provide a phone number so the court can contact you if you are excused.  
Cell \_\_\_\_\_ Day \_\_\_\_\_
- Signature \_\_\_\_\_ Preferred Name \_\_\_\_\_

3

## **Statewide Juror Questionnaire**



# JURY QUESTIONNAIRE



Please answer all the questions below. Your answers will help determine if you are qualified to serve as a juror, if you are eligible to be excused from jury service, and if your jury service can be rescheduled.

After you answer all the questions, immediately return the questionnaire to the court. If you have questions about jury service, please visit: [www.courts.alaska.gov/jury](http://www.courts.alaska.gov/jury) or contact your local court.

Do not write on the back of this questionnaire and do not staple or tape additional documents to it. Write your Juror ID Number on each additional document you send to the jury clerk.

## TEST JUROR

Juror Summons #434354 Anchorage Petit January 2, 2022 Service # 734

Please use black ink.



Yes No Completely fill in the appropriate circle.

Juror ID Number: 77834905

● ○ (Example)

- 1. I am an Alaska resident.
- 2. I am a citizen of the United States. If no, enclose documentation that shows you are not a U.S. citizen.
- 3. I can read or speak the English language. ('No' means you can neither speak nor read English.)
- 4. I wish to be permanently excused because I am 70 years old or older.
- 5. I appeared for jury service within the past 24 months.
- 6. I have a mental or physical reason that prevents me from serving. Enclose a medical note from your doctor.
- 7. I am on parole or probation after being convicted of a felony. Please give case number or name of parole or probation officer: \_\_\_\_\_
- 8. I need an accommodation for a disability. Please indicate the type of accommodation you need:
  - Hearing Amplification  American Sign Language Interpreter
  - Other: \_\_\_\_\_
- 9. I am employed by the local school district, the University of Alaska system, or the Alaska Railroad.
- 10. I work for the State of Alaska. Agency: \_\_\_\_\_ Note: State employees are only eligible to receive pay for jury service outside of a standard work week. If you qualify for pay, notify the Jury Clerk.
- 11. I live more than 30 miles (one way) from the courthouse. If yes, write in your total round trip mileage: \_\_\_\_\_
- 12. I wish to reschedule my jury service to another week within the next 10 months. Write your requested date below: \_\_\_\_\_

13. Comments: \_\_\_\_\_

14. Phone: Cell (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ 15. Do you have a new address?  Mailing  Home  Both

|                       |
|-----------------------|
| Contact #<br>required |
|-----------------------|

 Day (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Eve (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

16. Email address: \_\_\_\_\_

17. Change of Name: \_\_\_\_\_

These answers are true and correct.

\_\_\_\_\_  
Signature  
TEST JUROR

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**ARIZONA**

**4**

**Maricopa County – Step by Step Process of  
Statewide eJuror System**

# STEP BY STEP PROCESS OF EJUROR SYSTEM.UPDATE.06.10.22

[Contact Us](#) | [Maricopa County Superior Court Jury Services](#)



The Judicial Branch of Arizona  
Maricopa County



## Login

Welcome to the Maricopa County, Arizona eJuror System. This online tool is to qualify for jury service, ask for excuse/disqualification, postponements, and proof of service. This site currently does not show reporting status. Please call recording number on your summons for further directions. To log in, please enter your information below.

Juror ID

First Three Letters of Your Last Name  
(excluding hyphens, apostrophes, spaces, etc.)

Date of Birth   
(enter as MM-DD-YYYY) •

GROUP: 3000  
← JUROR ID: 123456789  
\*123456789\*

[Click for larger view](#)

Login

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## Welcome

If your name is not TEST RECORD TEST, please hit cancel to logout.

Your name has been randomly selected for jury service in SUPERIOR COURT IN MARICOPA COUNTY. Trial by jury is a keystone of our system of justice. Jury service is, therefore, both an opportunity and an obligation of every American. All jurors will receive mileage and, unless they are county government employees, sworn jurors will receive an attendance fee for each day of service.

In order for us to obtain some information about you from which we can objectively determine whether you are qualified to serve pursuant to Arizona State Law, please fully complete the following questionnaire. Prospective jurors are required by law to complete the questionnaire and you must answer every question. A section regarding hardship is also included in the questionnaire. Completing this section may eliminate the need for you to appear in person.

Once you complete the questionnaire you will have the opportunity, if eligible, to request to be disqualified, excused, or postponed via the [Jury Homepage Dashboard](#).

**DO NOT** use the back and forward arrows/buttons at the top of your screen or you will be logged out of the system. When available, use only the back or next buttons at the bottom of the screen to navigate the site. You will have an opportunity to review your answers and make corrections before you submit the questionnaire.

You must call in on the business day prior to your summons date to confirm if you are required to appear or not. Refer to your summons for call-in times and phone numbers.

I declare under penalty of perjury that all answers I will provide are true to the best of my knowledge and belief.

Continue

Cancel



The Judicial Branch of Arizona  
Maricopa County

Test Test, Group=2009, Juror ID=107067631

Logout

### ? Questionnaire

Are you the person whose name and information  
displays above? \*

Yes

Next



[Related Links](#) | [Contact Us](#) | [Maricopa County Superior Court Jury Services](#)



The Judicial Branch of Arizona  
Maricopa County

Test Test, Group=2009, Juror ID=107067631

Logout

### 📅 Review Your Answers

Are you the person whose name and information displays above?

**Yes**

Are you responding on behalf of this person because they are deceased?

**N/A**

By confirming these answers, I certify under penalty of perjury under the laws of the State of Arizona that the information provided is true and correct.

Confirm

Cancel



 **General Information**

**PROSPECTIVE JUROR INFORMATION**

Please carefully read the information below before proceeding.

**USING eJUROR TO RESPOND TO YOUR SUMMONS**

Once you have read the information page, you will be asked to complete a questionnaire and confirm the information you have entered. Once you have confirmed, you will arrive at the landing page. You have now responded to your jury summons. If you need to make a request to be excused or disqualified, you can do so from the landing page. You can also request a postponement. If you make a request and do not receive notification via email, text, or postcard within 10 days, please log in to eJuror again to check your status before contacting our office.

**CALL-IN INSTRUCTIONS**

Please call the phone number listed on your summons AFTER 5:00 PM on the business day before your appearance date and listen for your instructions. Please be prepared to report mid-day if instructed to do so. If you cannot report to jury service on a two-hour notice, click on Postponement after completing and confirming the questionnaire, and select a specific date (Monday-Thursday) to report.

**WIFI, LUNCH AND OTHER INFORMATION**

You may bring personal laptops, reading materials, etc. Free WiFi is available. There are brief recesses throughout the day, and you will have at least an hour for lunch. If you bring your lunch microwaves are available but you will not have access to a fridge. Vending machines are also available in the jury assembly area.

**STUDENTS AND TEACHERS**

Students and teachers are required to serve. You may, however, reschedule your jury service to a date during school breaks.

**JURY DUTY: YOUR RIGHT AND RESPONSIBILITY**

The right of a trial by jury is the privilege of every person in the United States. This right is guaranteed by the U.S. Constitution which provides that "the right of trial by jury shall be secured to all and remain inviolate."

**WEAPONS SCREENING**

The Court has security screening consisting of metal detectors and x-ray machines. Anything considered to be a weapon or that is deemed to be unacceptable by Court Security will be confiscated and/or dealt with accordingly. No straight razors, pocket, hunting, or butterfly knives, scissors, mace, pepper spray or any type of firearms are allowed.

**JUROR FEES**

Jurors are paid 44.5 cents a mile, round-trip, starting with the first day of service. The mileage fee is paid to jurors regardless of whether they are sworn or going through jury selection. Jurors who complete two or more days of service will be paid \$12 per day of service.

**BREASTFEEDING MOTHERS**

If you are currently exclusively breastfeeding a child and do not work outside the home, you may request postponement of your service.

**TERM OF SERVICE**

The term of service is one day or one trial. If you are not selected to serve on a trial by the end of the first day, and are not ordered by the Court to return for a second or subsequent day of selection, your term of service is complete. Jurors who fulfill one day of service will be exempt from summoning for a period of 18 months. Jurors serving two (2) or more days will be exempt for two (2) years.

**DRESS CODE**

Business casual attire is suggested. Shorts and tank tops are not appropriate courtroom attire. Hats are not permitted to be worn in the courtroom. The temperature of the jury assembly areas and courtrooms are unpredictable. Jurors should wear comfortable clothing that is appropriate to the seriousness and dignity of the courtroom.

**PERSONS WITH DISABILITIES/ADA ACCOMMODATIONS**


To request a special accommodation such as a sign language interpreter, please contact the jury office at 602-506-5879 and provide the requested follow-up information.

**NOTICE TO EMPLOYERS: RIGHT TO TIME OFF**

Arizona Rev. Stat. 21-236.B. states: "An employer shall not refuse to permit an employee to serve as a juror. No employer may dismiss or in any way penalize any employee because the employee serves as a grand or trial juror." If an employee works the night shift, an employer is still required by law to give that employee a leave of absence from work during the period of jury service.

Continue



 Contact Information

First Name

Middle Name

Last Name

Street

City

State

Zip

Primary Phone Number \*

Would you like to receive notifications via text message\* regarding your jury service? \*

**\*Standard carrier rates apply.**

Email \*

Confirm Email \*

Next





### Review Your Answers

First Name

**TEST**

Middle Name

**RECORD**

Last Name

**TEST**

Street

**111 S NOWHERE**

City

**PHOENIX**

State

**AZ-Arizona**

Zip

**850034000**

Primary Phone Number

**8182053290**

Would you like to receive notifications via text message\* regarding your jury service?

**No**

Cell Phone Number

**N/A**

Please select your cell phone carrier.

**N/A**

Email

**JASON.VASQUEZ@JBAZMC.MARICOPA.GOV**

Confirm Email

**JASON.VASQUEZ@JBAZMC.MARICOPA.GOV**

By confirming these answers, I certify under penalty of perjury under the laws of the State of

? Qualification Questionnaire

Are you a citizen of the United States? \*

If you say you are not a resident of the jurisdiction the jury office will evaluate your request and your residency information and you will be notified if the disqualification request was granted or not.

- If summoned for a Superior Court Location (Maricopa County Superior Court, Northeast or Southeast Regional Court) and you are a resident of Maricopa County you are a resident of the jurisdiction you were summoned for.
- If summoned for a Municipal Court and you are a resident of that City you are a resident of the jurisdiction you were summoned for.
- If summoned for a Justice Court and you are a resident of that Precinct you are a resident of the jurisdiction you were summoned for.
- If summoned for County Grand Jury and you are a resident of Maricopa County you are a resident of the jurisdiction you were summoned for.
- If summoned for State Grand Jury and you are a resident of the State of Arizona you are a resident of the jurisdiction you were summoned for.

Are you a resident of the area for which you were summoned? \*

Are you 18 years of age or older? \*

Have you been convicted of a felony? \*

Have you been adjudicated mentally incompetent or insane? \*

Next



### Review Your Answers

Are you a citizen of the United States?

**Yes**

Are you a resident of the area for which you were summoned?

**Yes**

Street

**N/A**

City

**N/A**

State

**N/A**

Zip

**N/A**

Are you 18 years of age or older?

**Yes**

You are stating you are UNDER the age of 18 - please enter your date of birth

**N/A**

Have you been convicted of a felony?

**No**

Where and when?

**N/A**

Have your civil rights been restored?

**N/A**

Date restored

**N/A**

Have you been adjudicated mentally incompetent or insane?

**No**

By confirming these answers, I certify under penalty of perjury under the laws of the State of Arizona that the information provided is true and correct.

? Questionnaire

**HARDSHIPS**

The following questions address your ability to serve as a juror. Please keep in mind it is not whether you want to serve, but whether you can serve. Arizona law only permits a prospective juror to be removed for specific reasons, including that jury service would cause an undue or extreme physical or financial hardship to the prospective juror or that service would substantially and materially affect the public interest or welfare.

Additionally, if you are concerned about managing your work responsibilities or care for another, you may request to postpone your jury service for up to 90 days. Please visit the [Jury website](#) for details or call 602-506-JURY(5879) for more information.

Are you requesting to be released from jury service as a result of undue hardship (example: financial, employment, travel, care provider, etc.)?

Based on the information I have provided above, I am asking to be released from jury service.

**The answers you are submitting will be reviewed prior to your date of service and you will receive notification if you are excused or otherwise not required to report for service. To make an immediate request to be excused or disqualified, or to immediately postpone your service, please complete your questionnaire and proceed to the dashboard on your eJuror profile to start your request and submit supporting documents.**

Next

## HARDSHIPS

The following questions address your ability to serve as a juror. Please keep in mind it is not whether you want to serve, but whether you can serve. Arizona law only permits a prospective juror to be removed for specific reasons, including that jury service would cause an undue or extreme physical or financial hardship to the prospective juror or that service would substantially and materially affect the public interest or welfare.

Additionally, if you are concerned about managing your work responsibilities or care for another, you may request to postpone your jury service for up to 90 days. Please visit the [Jury website](#) for details or call 602-506-JURY(5879) for more information.

Are you requesting to be released from jury service as a result of undue hardship (example: financial, employment, travel, care provider, etc.)?

My request is related to:

Care Provider

If you are requesting to be released from jury service because you provide care for another (child or adult), is there someone who can provide the care while you serve on a jury?

Please explain in detail why not or whether you need additional information to answer this question:

Employment

If your request to be released from jury service is employment related, please identify your employer, the nature of your employment, and your job duties and be specific:

Financial Hardship

If you are requesting to be released from service due to financial hardship, please review our [Compensation](#) page. Additionally, the [Arizona Lengthy Trial Fund](#) allows jurors who qualify to recover some, most, or maybe even all of your lost income during jury service. For trials of 6 or more court days, you may be reimbursed for lost income of up to \$300 a day from day 1 to the end of the case. If you still are concerned about potential loss of income you will have an opportunity to explain that below.

If you are requesting to be released from service due to financial hardship, please review our [Compensation](#) page. Additionally, the [Arizona Lengthy Trial Fund](#) allows jurors who qualify to recover some, most, or maybe even all of your lost income during jury service. For trials of 6 or more court days, you may be reimbursed for lost income of up to \$300 a day from day 1 to the end of the case. If you still are concerned about potential loss of income you will have an opportunity to explain that below.

After reviewing the information regarding juror compensation, are you still requesting to be relieved from service due to financial hardship?

If yes, please explain in detail the reason for your request:

If yes, does your employer compensate for jury service?

Physical Hardship

Please detail the reason you are requesting to be released from jury service, and be specific:

If you would like to submit a doctor's note or a medical excuse form, please call the Jury Office at 602-506-5879 for more information.

Other

If you are requesting to be released from jury service for a reason not listed above, please explain and be specific:

**If you answered "yes" to any of the above, you are NOT excused from jury service. If the Court determines that you are not able to complete your service at the courthouse, you will be notified.**

**If you cannot serve on your currently scheduled date but can serve on a different date within the next 60-90 days, please complete your questionnaire and then postpone your service to a date you are available by proceeding to the dashboard on your eJuror profile.**

Based on the information I have provided above, I am asking to be released from jury service.

**The answers you are submitting will be reviewed prior to your date of service and you will receive notification if you are excused or otherwise not required to report for service. To make an immediate request to be excused or disqualified, or to immediately postpone your service, please complete your questionnaire and proceed to the dashboard on your eJuror profile to start your request and submit supporting documents.**

Next



? Questionnaire

Employment status •

Current employer

Your occupation

Previous occupation

Years of education •

Years in Arizona •

Years in Maricopa County •

If you have lived in Maricopa County for less than one (1) year, please enter a zero (0). If you have a questionnaire for State Grand Jury and do not live in Maricopa County, please enter a zero (0).

Have you previously been a juror? •

Please list where and when

Do you have a disability that would require an accommodation under the Americans with Disabilities Act in order to serve as a juror?

**Please contact the jury office at 602-506-5879 to make arrangements for an ADA accommodation.**

**The following questions are required solely to avoid discrimination in juror selection and have absolutely no bearing on qualifications for jury service. By answering these questions, you help the court monitor the juror selection process so that discrimination does not occur. In this way the court can fulfill its legal obligation to provide jurors who are randomly selected from a fair cross section of this community.**

Please indicate gender

Are you of Hispanic or Latino ethnicity?

Please indicate race

Next





### Review Your Answers

Employment status

**Employed**

Current employer

**N/A**

Your occupation

**N/A**

Previous occupation

**N/A**

Years of education

**15**

Years in Arizona

**15**

Years in Maricopa County

**15**

Have you previously been a juror?

**Yes**

Please list where and when

**N/A**

Do you have a disability that would require an accommodation under the Americans with Disabilities Act in order to serve as a juror?

**Yes**

Please indicate gender

**Male**

Are you of Hispanic or Latino ethnicity?

**Yes**

Please indicate race

**Native Hawaiian/Pacific Islander**

By confirming these answers, I certify under penalty of perjury under the laws of the State of

~~Arizona that the information provided is true and correct.~~

 **Jury Homepage**



You are currently On Call.

Upload File

You are required to call in after 5:00 PM on 06/13/2022 at 602-506-8000 (TDD:602-506-8699) and follow the instructions for your Group number 2009.

Please contact the jury office at (602) 506-5879 if you wish to update your record and do not see an option to do so.

**Reporting Details**

Your Juror Number: **107067631**

What to Expect...

Report To: SUPERIOR COURT IN MARICOPA COUNTY  
175 W. MADISON ST., FIRST FLOOR, SUITE  
1308  
PHOENIX, AZ-Arizona 85003

Get Directions to Courthouse/Parking

**Contact Information**

Test Test

Edit

111 S Nowhere  
Phoenix, AZ  
85003

Home Tel No: 818-205-3290

JASON.VASQUEZ@JBAZMC.MARICOPA.GOV

**ARKANSAS**

5

**Howard County – Jury Summons with  
Qualification Questionnaire and Juror  
Questionnaire**

HOWARD COUNTY CIRCUIT CLERK'S OFFICE  
421 NORTH MAIN ROOM 7  
NASHVILLE, AR 71852

Official Court Document  
JURY SUMMONS DO NOT DISCARD

ADDRESS CORRECTION

Full Name: \_\_\_\_\_  
Were you summoned by your maiden name? Yes No  
Correct Address: \_\_\_\_\_  
Correct Zip Code: \_\_\_\_\_

Official Court Document  
JURY SUMMONS

Please print your corrected information ONLY if your name or address information is incorrect. Address data remains confidential and will be used by the court to give you accurate and timely notice and to ensure your payment for service. Arkansas law forbids the court clerk from giving this information to lawyers or the parties in litigation.



**DO NOT DISCARD**

**IT IS A PUNISHABLE OFFENSE FOR ANY PERSON SUMMONED FOR JURY SERVICE TO INTENTIONALLY FAIL TO APPEAR AS DIRECTED.**

Your name has been randomly selected from information provided by the Arkansas Secretary of State's voter registration list in accordance with Ark. Code Ann. 16-32-302. You are hereby ORDERED to report for jury service for a 4 month term of service or until excused by the court.

Juror Number:

The Honorable Charles Yeargan  
Circuit Judge: 870.285.2900

The Honorable Tom Cooper  
Circuit Judge: 870.898.7228

The Circuit Clerk's Office: 870.845.7506

TDD Deaf-phones: TDD User 1.800.285.1131  
Voice Relay to TDD: 1.800.285.1121

Location of trial when called:  
The Courthouse Courtroom - 2nd floor  
Nashville, AR 71852

**Please keep this lower section. It contains information for your scheduled jury service.**

**KEEP**

**You must complete the summons, sign it and mail it back to the court within 10 days.** Please fold with the business reply section visible. Or bring your completed summons to the Office of Circuit Court Clerk, Howard County Courthouse, 421 North Main Street, Nashville, AR 71852.

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State law prohibits the bringing of knives, guns or mace into the court building. Upon entering the courtroom, all phones, pagers and electronic devices must be turned off to prevent disruption of court proceedings. Failure to attend at the time and place directed is a serious matter. The Court may find the prospective juror in contempt of court, punishable by fine, incarceration or both.

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Arkansas law prohibits your employer from penalizing you (through firing or terminating your employment or through penalizing you with a loss of leave time) as a result of your jury service to avoid such penalties you must give your employer reasonable notice of your jury service. To avoid such penalties, you must give your employer reasonable notice of your jury summons. Your employer is not required to pay your wages or salary during jury service.

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**PLEASE DRESS APPROPRIATELY.**

**CHILDCARE IS NOT PROVIDED**

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**NOTICE TO HEARING OR VISUALLY IMPAIRED PERSONS:**

Pursuant to Ark. Code Ann. 16-31-108, if you are hearing or visually impaired and require accommodation in order to service as a juror, you are instructed to contact the Circuit Clerk's Office at 870-845-7506. This service is free to you.

## ONLY THE CIRCUIT JUDGE CAN EXCUSE A PERSON FROM JURY DUTY.

Neither the sheriff nor the court clerk can excuse a person from jury duty.

**Requests for excusal or postponement:** A person MAY be excused if the court finds that either the state of the juror's health or the juror's family reasonably requires his/her absence; OR when, in the opinion of the court, the juror's interests or those of the public will be materially injured by the juror's attendance. The law does not allow excusal because of occupation or employment.

### No person will be excused solely due to inconvenience.

Your request must state the nature of your conflict or hardship and must be received prior to your scheduled service date, unless it is a medical or personal emergency. Postponements are granted at the discretion of the Judge. You will be notified of the court's decision.

**You MUST appear in person, unless you have been disqualified or excused by the court.**

#### **CONTACT INFORMATION:**

**REQUIRED** Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**OPTIONAL** E-Mail Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### QUALIFICATION SECTION

**Please print your full name:**

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

**A person must be qualified to serve as a juror.**  
Arkansas law states that to be qualified or disqualified as a juror the Court must know the answer to the following questions:

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | I am at least eighteen (18) years of age   |
| <input type="checkbox"/> | <input type="checkbox"/> | I am a citizen of the United States  |
| <input type="checkbox"/> | <input type="checkbox"/> | I am a current resident of this county   |
| <input type="checkbox"/> | <input type="checkbox"/> | I am of sound mind and good moral character  |
| <input type="checkbox"/> | <input type="checkbox"/> | I am able to read and write in English   |
| <input type="checkbox"/> | <input type="checkbox"/> | I have served as a juror within two years in this county   |
| <input type="checkbox"/> | <input type="checkbox"/> | I have been convicted of a felony and have not received a pardon or expungement. (Answering YES means you have a felony record.) |

Do you have any physical impairment or disability which would prevent or impair your ability to serve as a juror? \_\_\_\_\_  
If yes, please state the impairment: \_\_\_\_\_

### QUESTIONNAIRE SECTION

Information is required by the Arkansas Rules of Criminal or Civil Procedure and will not be made public.

Your occupation or employer: \_\_\_\_\_

If retired, former profession: \_\_\_\_\_

Education level completed to: \_\_\_\_\_

Marital Status: Single: \_\_\_\_\_ Married: \_\_\_\_\_ Divorced: \_\_\_\_\_  
Separated: \_\_\_\_\_ Widowed: \_\_\_\_\_

If married name of spouse: \_\_\_\_\_

Occupation of spouse: \_\_\_\_\_

Number of children: \_\_\_\_\_ Ages of children: \_\_\_\_\_

Have you ever served as a juror? Yes \_\_\_\_\_ No \_\_\_\_\_

Year of jury service: \_\_\_\_\_

Has a claim for personal injury ever been made against you or any member of your family? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when: \_\_\_\_\_ Which state: \_\_\_\_\_

Have you or a member of your family ever made a claim for personal injuries? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you or any member of your family been a victim of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, nature of the offense: \_\_\_\_\_

Have you or a member of your family ever been charged with a criminal offense other than a traffic offense? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which state: \_\_\_\_\_

Do you or any member of your family work for or have any interest in an insurance company? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which company: \_\_\_\_\_

Do you have a case pending in Circuit Court? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you related to, or a close personal friend of any law enforcement officer or attorney? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have available transportation to court? Yes \_\_\_\_\_ No \_\_\_\_\_

**I solemnly swear or affirm that the answers to the foregoing statements are true and correct to the best of my knowledge and belief.**

Signature \_\_\_\_\_

Please make sure your confidential information is folded under when mailing this document back to the court.

**6**

**Lafayette County – Jury Summons with  
Qualification Questionnaire and Juror  
Questionnaire**



**ONLY THE CIRCUIT JUDGE CAN EXCUSE A PERSON FROM JURY DUTY.**

Neither the sheriff nor the court clerk can excuse a person from jury duty.

**Requests for excusal or postponement:** A person MAY be excused if the court finds that either the state of the juror's health or the juror's family reasonably requires his/her absence; OR when, in the opinion of the court, the juror's interests or those of the public will be materially injured by the juror's attendance. The law does not allow excusal because of occupation or employment.

**No person will be excused solely due to inconvenience.**

Your request must state the nature of your conflict or hardship and must be received prior to your scheduled service date, unless it is a medical or personal emergency. Postponements are granted at the discretion of the judge. You will be notified of the court's decision.

**You MUST appear in person, unless you have been disqualified or excused by the court.**

**Contact Information :**  
**required**

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

e-mail address: (optional) \_\_\_\_\_ cell phone \_\_\_\_\_

What is the **roundtrip mileage** from your home to the courthouse? \_\_\_\_\_ Mileage is not reimbursed by all courts.

**QUALIFICATION SECTION**

**Please Print Your Full Name:**

\_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

**A person must be qualified to serve as a juror.**

Arkansas law states that to be qualified or disqualified as a juror the court must know the answers to the following questions:

**Yes No**

I am at least eighteen (18) years of age

I am a citizen of the United States

I am a current resident of this county

I am of sound mind and good moral character

I am able to speak or understand English

I am able to read and write in English

I have served as a juror within two years in this county

I have been convicted of a felony and have not received a pardon.

(Answering **YES** means you have a felony record.)

Do you have a physical impairment or disability that would prevent or impair your ability to serve as a juror? \_\_\_\_\_ If yes, please state impairment \_\_\_\_\_

**QUESTIONNAIRE SECTION**

Certain information is required by the Arkansas Rules of Criminal or Civil Procedure, and will not be made public.

Your occupation or employer \_\_\_\_\_

If retired, former profession \_\_\_\_\_

Highest educational level completed \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_  
Separated \_\_\_\_\_ Widowed \_\_\_\_\_

If married, occupation of spouse \_\_\_\_\_

Have you ever served as a juror? **Yes No**  
year of jury service \_\_\_\_\_

Has a claim for personal injury ever been made against you or any member of your family? **Yes No** If yes, when? \_\_\_\_\_  
Which state/county? \_\_\_\_\_

Have you or a member of your family ever made a claim for personal injuries? **Yes No** If yes, when? \_\_\_\_\_

Have you or any member of your family been a victim of a crime? **Yes No** If yes, nature of the offense \_\_\_\_\_

Have you or a member of your family ever been charged with a criminal offense other than a traffic offense? **Yes No**  
If yes, explain \_\_\_\_\_

Do you or any member of your family work for or have any interest in an insurance company? **Yes No**  
If yes, which company \_\_\_\_\_

Do you have a case pending in circuit court? **Yes No**

Are you related to, or a close personal friend of any law enforcement officer or attorney? **Yes No**

I solemnly swear or affirm that the answers to the foregoing statements are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

**Please make sure your confidential information is folded under when mailing this document back to the court.**

**Please complete and mail within 10 days, unless otherwise instructed.**

Please keep this lower section. Fold and mail the top section with the court's return address visible.

State Law prohibits the bringing of knives, guns, or mace into the court building. **Upon entering the courtroom, all phones, pagers, and electronic devices must be turned off to prevent disruption of court proceedings.** The judge may order the collection of all electronic devices.

You will not be required to report for more than 10 days during a maximum service period of 4 months, unless you are participating in a trial. Please visit <https://arcourts.gov> for further information about jury service.

Arkansas law prohibits your employer from penalizing you (through firing or terminating your employment or through penalizing you with a loss of leave time) as a result of your jury service. To avoid such penalties you must give your employer reasonable notice of your jury summons. Your employer is not required to pay your wages or salary during jury service.

The court will never call asking for bank account information.

**Please Dress Appropriately**

**CHILDCARE IS NOT PROVIDED**

**NOTICE TO HEARING OR VISUALLY IMPAIRED PERSONS**

If you are hearing or visually impaired and require accommodation in order to serve as a juror, you are instructed to contact the circuit clerk. This service is free to you.



Official Court Document  
JURY SUMMONS DO NOT DISCARD

ADDRESS CORRECTION

Full Name: \_\_\_\_\_

Were you summoned by your maiden name? Yes No

Correct Address: \_\_\_\_\_

Correct Zip Code: \_\_\_\_\_

Official Court Document  
JURY SUMMONS



Please check the lower section of this summons. Is your birth year correct? If not, please provide your correct year of birth on this line \_\_\_\_\_

Please print your corrected information ONLY if your name or address information is incorrect. Address data remains confidential and will be used by the court to give you accurate and timely notice and to ensure your payment for service. Arkansas law forbids the court clerk from giving this information to lawyers or the parties in litigation.

**DO NOT DISCARD**

It is a punishable offense for any person summoned for jury service to intentionally fail to appear as directed.

Your name has been randomly selected from information provided by the Arkansas Secretary of State's voter registration list and/or by the Arkansas Driver Services' in accordance with Ark. Code Ann. §16-32-302.

**IF MAILING, PLEASE TAPE HERE – ACROSS THE ENTIRE TOP – DO NOT STAPLE**

You are hereby ORDERED to report for jury service

Juror Number:

Your Year of Birth:

Group:

Location:

**Please keep this lower section. It contains information for your scheduled jury service.**

TDD phones for deaf: TDD User 1-800-285-1131  
Voice Relay to TDD: 1-800-285-1121

7

**Miller County – Jury Summons with  
Qualification Questionnaire and Juror  
Questionnaire**



**ONLY THE CIRCUIT JUDGE CAN EXCUSE A PERSON FROM JURY DUTY.**

Neither the sheriff nor the court clerk can excuse a person from jury duty.

**Requests for excusal or postponement:** A person MAY be excused if the court finds that either the state of the juror's health or the juror's family reasonably requires his/her absence; OR when, in the opinion of the court, the juror's interests or those of the public will be materially injured by the juror's attendance. The law does not allow excusal because of occupation or employment.

**No person will be excused solely due to inconvenience.**

Your request must state the nature of your conflict or hardship and must be received prior to your scheduled service date, unless it is a medical or personal emergency. Postponements are granted at the discretion of the Judge. You will be notified of the court's decision.

**You MUST appear in person, unless you have been disqualified or excused by the court.**

**Contact Information :**

**required**

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

e-mail address: (optional) \_\_\_\_\_ cell phone \_\_\_\_\_

What is the **roundtrip mileage** from your home to the courthouse? \_\_\_\_\_

**QUALIFICATION SECTION**

**Please Print Your Full Name:**

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

**A person must be qualified to serve as a juror.**

Arkansas law states that to be qualified or disqualified as a juror the Court must know the answer to the following questions:

**Yes No**

I am at least eighteen (18) years of age

I am a citizen of the United States

I am a current resident of this county

I am of sound mind and good moral character

I am able to read and write in English

I have served as a juror within two years in this county

I have been convicted of a felony and have not received a pardon or expungement. (Answering **YES** means you have a felony record.)

Do you have any physical impairment or disability which would prevent or impair your ability to serve as a juror? \_\_\_\_\_ If yes, please state impairment \_\_\_\_\_

**QUESTIONNAIRE SECTION**

Information is required by the Arkansas Rules of Criminal or Civil Procedure and will not be made public.

Your occupation or employer \_\_\_\_\_

If retired, former profession \_\_\_\_\_

Educational level completed to \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_  
Separated \_\_\_\_\_ Widowed \_\_\_\_\_

If married, name of spouse \_\_\_\_\_

Occupation of spouse \_\_\_\_\_

Number of children \_\_\_\_\_ Ages of children \_\_\_\_\_

Have you ever served as a juror? Yes No  
year of jury service \_\_\_\_\_

Has a claim for personal injury ever been made against you or any member of your family? Yes No  
If yes, when? \_\_\_\_\_ Which state? \_\_\_\_\_

Have you or a member of your family ever made a claim for personal injuries? Yes No If yes, when? \_\_\_\_\_

Have you or any member of your family been a victim of a crime? Yes No If yes, nature of the offense \_\_\_\_\_

Have you or a member of your family ever been charged with a criminal offense other than a traffic offense? Yes No If yes, which state? \_\_\_\_\_

Do you or any member of your family work for or have any interest in an insurance company? Yes No  
If yes, which company \_\_\_\_\_

Do you have a case pending in Circuit Court? Yes No

Are you related to, or a close personal friend of any law enforcement officer or attorney? Yes No

Do you have available transportation to court? Yes No

**I solemnly swear or affirm that the answers to the foregoing statements are true and correct to the best of my knowledge and belief.**

\_\_\_\_\_  
Signature

MAIL

Please make sure your confidential information is folded under when mailing this document back to the court

**You must complete the summons, sign it and mail it back to the court within 10 days.**

Please fold with the return section visible and mail this information back to the court.

State Law prohibits the bringing of knives, guns, or mace into the court building. **Upon entering the courtroom, all phones, pagers, and electronic devices must be turned off to prevent disruption of court proceedings.**

You will not be required to report for more than 10 days during a maximum service period of 4 months, unless you are participating in a trial. Ark. Code Ann. §16-31-104

Arkansas law prohibits your employer from penalizing you (through firing or terminating your employment or through penalizing you with a loss of leave time) as a result of your jury service. To avoid such penalties you must give your employer reasonable notice of your jury summons. Your employer is not required to pay your wages or salary during jury service.

The court will never call asking for bank account information. Do not tell any caller your bank account number.

**Please Dress Appropriately**

**CHILDCARE IS NOT PROVIDED**

**NOTICE TO HEARING OR VISUALLY IMPAIRED PERSONS.**

Pursuant to Ark. Code Ann. §16-31-108, if you are hearing or visually impaired and require accommodation in order to serve as a juror, you are instructed to contact the Circuit Clerk. This service is free to you.

PENNY KILCREASE, CIRCUIT CLERK  
MILLER COUNTY COURTHOUSE  
412 LAUREL ROOM 109  
TEXARKANA, AR 71854

**Official Court Document**  
**JURY SUMMONS DO NOT DISCARD**

ADDRESS CORRECTION

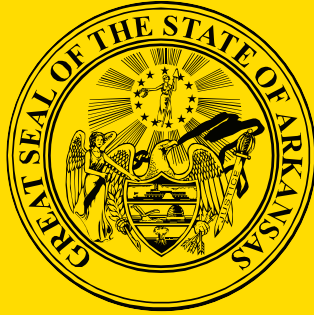
Full Name: \_\_\_\_\_

Were you summoned by your maiden name? Yes No  
Correct Address: \_\_\_\_\_

Correct Zip Code: \_\_\_\_\_

**Official Court Document**  
**JURY SUMMONS**

Please print your corrected information ONLY if your name or address information is incorrect. Address data remains confidential and will be used by the court to give you accurate and timely notice and to ensure your payment for service. Arkansas law forbids the court clerk from giving this information to lawyers or the parties in litigation.



**DO NOT DISCARD**

**IT IS A PUNISHABLE OFFENSE FOR ANY PERSON SUMMONED FOR JURY SERVICE TO INTENTIONALLY FAIL TO APPEAR AS DIRECTED.**

**SUMMONS RETURN**  
**MILLER COUNTY CIRCUIT CLERK**  
**MILLER COUNTY COURTHOUSE**  
**412 LAUREL ROOM 109**  
**TEXARKANA AR 71854**

PLACE  
STAMP  
HERE

**DO NOT STAPLE**  
**TAPE HERE BEFORE MAILING BACK TO THE COURT.**

**YOUR NAME HAS BEEN RANDOMLY SELECTED FROM INFORMATION PROVIDED BY THE ARKANSAS SECRETARY OF STATE'S VOTER REGISTRATION LIST IN ACCORDANCE WITH ARK. CODE ANN. 16-32-302.**

**Jury service is a 4 (four) month term of service or until excused by the court.**

**YOU WILL RECEIVE A POST CARD ADVISING YOU WHEN & WHERE TO REPORT.  
PRIOR TO YOUR REPORT DATE, YOU WILL NEED TO CALL  
870-772-5627 TO CHECK IF COURT HAS BEEN CANCELLED.**

**PLEASE KEEP THIS PERFORATED SECTION. IT CONTAINS INFORMATION FOR YOUR  
JURY SERVICE.**

**PENNY KILCREASE, MILLER COUNTY CIRCUIT CLERK**

**8**

**Phillips County – Jury Summons with  
Qualification Questionnaire and Juror  
Questionnaire**



**ONLY THE CIRCUIT JUDGE CAN EXCUSE A PERSON FROM JURY DUTY.**

Neither the sheriff nor the court clerk can excuse a person from jury duty.

**Requests for excusal or postponement:** A person MAY be excused if the court finds that either the state of the juror's health or the juror's family reasonably requires his/her absence; OR when, in the opinion of the court, the juror's interests or those of the public will be materially injured by the juror's attendance. The law does not allow excusal because of occupation or employment.

**No person will be excused solely due to inconvenience.**

Your request must state the nature of your conflict or hardship and must be received prior to your scheduled service date, unless it is a medical or personal emergency. Postponements are granted at the discretion of the judge. You will be notified of the court's decision.

**You MUST appear in person, unless you have been disqualified or excused by the court.**

**Contact Information :**

**required**

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

e-mail address: (optional) \_\_\_\_\_ cell phone \_\_\_\_\_

What is the **roundtrip mileage** from your home to the courthouse? \_\_\_\_\_ Mileage is not reimbursed by all courts.

**QUALIFICATION SECTION**

**Please Print Your Full Name:**

\_\_\_\_\_  
Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

**A person must be qualified to serve as a juror.**

Arkansas law states that to be qualified or disqualified as a juror the court must know the answers to the following questions:

**Yes No**

I am at least eighteen (18) years of age

I am a citizen of the United States

I am a current resident of this county

I am of sound mind and good moral character

I am able to speak or understand English

I am able to read and write in English

I have served as a juror within two years in this county

I have been convicted of a felony and have not received a pardon.

**(Answering YES means you have a felony record.)**

Do you have a physical impairment or disability that would prevent or impair your ability to serve as a juror? \_\_\_\_\_ If yes, please state impairment \_\_\_\_\_

**QUESTIONNAIRE SECTION**

Certain information is required by the Arkansas Rules of Criminal or Civil Procedure, and will not be made public.

Your occupation or employer \_\_\_\_\_

If retired, former profession \_\_\_\_\_

Highest educational level completed \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_  
Separated \_\_\_\_\_ Widowed \_\_\_\_\_

If married, occupation of spouse \_\_\_\_\_

Have you ever served as a juror? **Yes No**  
year of jury service \_\_\_\_\_

Has a claim for personal injury ever been made against you or any member of your family? **Yes No** If yes, when? \_\_\_\_\_  
Which state/county? \_\_\_\_\_

Have you or a member of your family ever made a claim for personal injuries? **Yes No** If yes, when? \_\_\_\_\_

Have you or any member of your family been a victim of a crime? **Yes No** If yes, nature of the offense \_\_\_\_\_

Have you or a member of your family ever been charged with a criminal offense other than a traffic offense? **Yes No**  
If yes, explain \_\_\_\_\_

Do you or any member of your family work for or have any interest in an insurance company? **Yes No**  
If yes, which company \_\_\_\_\_

Do you have a case pending in circuit court? **Yes No**

Are you related to, or a close personal friend of any law enforcement officer or attorney? **Yes No**

**I solemnly swear or affirm that the answers to the foregoing statements are true and correct to the best of my knowledge and belief.**

\_\_\_\_\_  
**Signature**

**Please make sure your confidential information is folded under when mailing this document back to the court,**

**Please complete and mail within 10 days, unless otherwise instructed.**

Please keep this lower section. Fold and mail the top section with the court's return address visible.

9

**Administrative Office of the Courts –  
Statewide Qualification Questionnaire and Juror  
Questionnaire**



**QUALIFICATION SECTION**

**Please Print Your Full Name:**

\_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age \_\_\_\_\_

**A person must be qualified to serve as a juror.**

Arkansas law states that to be qualified or disqualified as a juror the court must know the answers to the following questions:

**Yes No**

- I am at least eighteen (18) years of age
- I am a citizen of the United States
- I am a current resident of this county
- I am of sound mind and good moral character
- I am able to speak or understand English
- I am able to read and write in English
- I have served as a juror within two years in this county
- I have been convicted of a felony and have not received a pardon.

(Answering **YES** means you have a felony record.)

Do you have a physical impairment or disability that would prevent or impair your ability to serve as a juror? \_\_\_\_\_ If yes, please state impairment \_\_\_\_\_

**QUESTIONNAIRE SECTION**

Certain information is required by the Arkansas Rules of Criminal or Civil Procedure, and will not be made public.

Your occupation or employer \_\_\_\_\_

If retired, former profession \_\_\_\_\_

Highest educational level completed \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_  
Separated \_\_\_\_\_ Widowed \_\_\_\_\_

If married, occupation of spouse \_\_\_\_\_

Have you ever served as a juror? **Yes No**  
year of jury service \_\_\_\_\_

Has a claim for personal injury ever been made against you or any member of your family? **Yes No** If yes, when? \_\_\_\_\_  
Which state/county? \_\_\_\_\_

Have you or a member of your family ever made a claim for personal injuries? **Yes No** If yes, when? \_\_\_\_\_

Have you or any member of your family been a victim of a crime? **Yes No** If yes, nature of the offense \_\_\_\_\_

Have you or a member of your family ever been charged with a criminal offense other than a traffic offense? **Yes No**  
If yes, explain \_\_\_\_\_

Do you or any member of your family work for or have any interest in an insurance company? **Yes No**  
If yes, which company \_\_\_\_\_

Do you have a case pending in circuit court? **Yes No**

Are you related to, or a close personal friend of any law enforcement officer or attorney? **Yes No**

I solemnly swear or affirm that the answers to the foregoing statements are true and correct to the best of my knowledge and belief.

\_\_\_\_\_ Signature

**Please make sure your confidential information is folded under when mailing this document back to the court •**

**CALIFORNIA**

**10**

**Juror Questionnaire for Civil Cases**

# JUROR QUESTIONNAIRE FOR CIVIL CASES

Code of Civil Procedure Section 205(c)-(d)

## Sec. 1. Statutory Authority

This Juror Questionnaire has been drafted under the authority of Code of Civil Procedure section 205(c)-(d) and is intended to expedite jury selection. It is not intended to alter statutes or rules governing the authority of the court or the role of counsel during voir dire.

## Sec. 2. Use Notes for Courts

### A. General

This Juror Questionnaire is intended for use in the court's discretion in appropriate civil cases. Its use in cases of brief duration may not be appropriate. Particular kinds of cases may require that this questionnaire be altered or augmented. The Personal Injury Supplement is intended to be used along with the General Questions in personal injury actions. Judges, in their own discretion, must determine what additional kinds of inquiry are appropriate in any given case.

### B. Pre-Voir Dire Conference

The court should confer with counsel about voir dire before a jury panel is called. At this conference, the court may establish (1) guidelines for the use of the Juror Questionnaire, (2) any supplemental questions to be propounded to the panel by questionnaire, (3) the extent of the court's oral inquiry of the panel, and (4) the extent of oral questioning by counsel. Proposed supplemental questions drafted by counsel should be filed and served at least three court days before the pre-voir dire conference. Arrangements for duplication of completed questionnaires should be confirmed. The parties should share the cost of duplication.

### C. Introduction of Questionnaire to Prospective Jurors

It is suggested that the Juror Questionnaire be used after the court has given its customary introductory remarks and any additional instructions that the court deems appropriate. The court also may wish to tell the panel members that a questionnaire will be used, to encourage complete answers, and to remind them that their answers will be given under penalty of perjury. In introducing the questionnaire, the court should instruct prospective jurors how to proceed if they have difficulty reading or filling out the form.

The court could direct that the Juror Questionnaire be given to prospective jurors by the jury commissioner in the jury assembly room. However, this procedure ordinarily will mean that jurors are not given complete instructions about the type of case they will hear or the identity of participants and witnesses. In addition, jurors who fill out the form before appearing in the trial court may not clearly understand that their answers are given under penalty of perjury. For these reasons, and to avoid the need to have jurors fill out supplemental questionnaires once they have been sent to the trial court, it is strongly recommended that the Juror Questionnaire be used in the trial court setting.

# JUROR QUESTIONNAIRE FOR CIVIL CASES

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## Introduction and Instructions

Thank you for coming to court as a potential juror. Before the case can start, a jury must be selected. The judge and the people involved in the case need to know something about you in order to select jurors who can be fair to both sides.

Everyone has attitudes and opinions that are shaped by their life experiences. Sometimes these experiences can make it difficult to look at a certain issue in an unbiased and unemotional way. As a juror, you must return a verdict based on the law and on the facts proved in court, not on emotion or on other views not supported by the evidence. The judge will give you instructions on the law and on how you should go about deciding the case. You must listen to and follow the judge's instructions.

The questions on this form are designed to help the court and the lawyers learn something about your background and your views on issues that may be related to this case. The questions are asked not to invade your privacy, but to make sure that you can be a fair and impartial juror. If there is any reason why you might not be able to give both sides a fair trial in this case, it is important that you say so.

The judge has decided to use this form to save time and to give you a chance to tell the court and the lawyers about yourself.

In portions of this form, you will see the term "significant personal relationship." That term means a former spouse, domestic partner, life partner, or anyone with whom you have an influential or intimate relationship that you would characterize as important.

If there is anything you do not want to talk about in open court, please circle the question number. After you have finished the questionnaire, let the clerk know that you have circled one or more question numbers.

Do not write on the back of any page. Use an additional sheet of paper.

If you are called to the jury box, your answers to this questionnaire become a matter of public record, just as if you had answered the questions aloud in the courtroom.

If you have trouble reading, understanding, or filling out this form, please let the court clerk know.

**PLEASE REMEMBER THAT YOU ARE ANSWERING THESE QUESTIONS UNDER PENALTY OF PERJURY. YOUR ANSWERS MUST BE TRUE AND COMPLETE. THANK YOU FOR YOUR HELP IN SELECTING A FAIR JURY.**

# JUROR QUESTIONNAIRE FOR CIVIL CASES

General Questions  
PLEASE PRINT ALL ANSWERS LEGIBLY

**FULL NAME:** \_\_\_\_\_

**1.1 DATE AND PLACE OF BIRTH:** \_\_\_\_\_

**1.2 AREA, NEIGHBORHOOD, OR COMMUNITY IN THIS COUNTY WHERE YOU CURRENTLY LIVE (DO NOT GIVE YOUR ADDRESS):**

\_\_\_\_\_  
 HOUSE  APARTMENT  OWN  RENT

**1.3 AREA, NEIGHBORHOOD, OR COMMUNITY WHERE YOU HAVE LIVED IN THE PAST 10 YEARS (AND DATES):**

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

**1.4 WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU COMPLETED?**

GRADE SCHOOL OR LESS

SOME HIGH SCHOOL

HIGH SCHOOL GRADUATE

OTHER (PLEASE EXPLAIN):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SOME COLLEGE

(MAJOR): \_\_\_\_\_

COLLEGE GRADUATE

(MAJOR): \_\_\_\_\_

POSTGRADUATE STUDY

(MAJOR): \_\_\_\_\_

TECHNICAL, VOCATIONAL, OR BUSINESS SCHOOL

(MAJOR): \_\_\_\_\_

**1.5 IF YOU PLAN TO ATTEND OR ARE CURRENTLY ATTENDING SCHOOL, DESCRIBE:**

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

**1.6 IF YOU HAVE TAKEN ANY COURSES OR HAD ANY TRAINING IN MEDICINE OR OTHER HEALTH CARE FIELD, DESCRIBE:**

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

1.7 IF YOU HAVE TAKEN ANY COURSES OR HAD ANY TRAINING IN LAW OR A RELATED SUBJECT, DESCRIBE:

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

1.8 EDUCATIONAL BACKGROUND OF ANY OTHER ADULT WHO LIVES IN YOUR HOME, INCLUDING ANY DEGREES OR CERTIFICATES EARNED:

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

1.9 YOUR PRESENT EMPLOYMENT STATUS (CHECK ALL THAT APPLY):

EMPLOYED FULL-TIME       RETIRED       UNEMPLOYED, LOOKING FOR WORK  
 EMPLOYED PART-TIME       STUDENT       UNEMPLOYED, NOT LOOKING FOR WORK  
 HOMEMAKER

1.10 YOUR CURRENT OR MOST RECENT OCCUPATION:

\_\_\_\_\_

1.11 NAME OF YOUR CURRENT OR MOST RECENT EMPLOYER OR, IF A STUDENT, YOUR SCHOOL:

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

1.12 WHAT ARE YOUR SPECIFIC DUTIES AND RESPONSIBILITIES ON THE JOB?

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

1.13 DOES YOUR JOB INVOLVE SUPERVISING OTHER PEOPLE?  YES  NO

IF YES, APPROXIMATELY HOW MANY? \_\_\_\_\_

1.14 ARE YOU INVOLVED IN THE HIRING OR FIRING OF OTHER EMPLOYEES?  YES  NO

1.15 ARE YOU INVOLVED IN EVALUATING THE JOB PERFORMANCE OF OTHER EMPLOYEES?  YES  NO

1.16 ALL OTHER EMPLOYMENT YOU HAVE HAD (AND FOR HOW LONG):

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

1.17 ALL FULL-TIME EMPLOYMENT OF YOUR SPOUSE OR ANY PERSON WITH WHOM YOU HAVE A SIGNIFICANT PERSONAL RELATIONSHIP (AND FOR HOW LONG):

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

1.18 WHAT ARE/WERE THE OCCUPATIONS OF YOUR PARENTS? (IF RETIRED, WHAT DID THEY DO BEFORE?)

MOTHER: \_\_\_\_\_

FATHER: \_\_\_\_\_

1.19 IF YOU HAVE CHILDREN, PLEASE LIST (INCLUDING ANY CHILDREN WHO DO NOT CURRENTLY LIVE WITH YOU):

| SEX   | AGE   | DOES CHILD LIVE WITH YOU? | EDUCATION | OCCUPATION |
|-------|-------|---------------------------|-----------|------------|
| _____ | _____ | _____                     | _____     | _____      |
| _____ | _____ | _____                     | _____     | _____      |
| _____ | _____ | _____                     | _____     | _____      |
| _____ | _____ | _____                     | _____     | _____      |

1.20 IF YOU OR YOUR CURRENT SPOUSE OR PERSON WITH WHOM YOU HAVE A SIGNIFICANT PERSONAL RELATIONSHIP HAS EVER SERVED IN THE MILITARY, PLEASE LIST FOR EACH THE BRANCH OF SERVICE AND DATES OF SERVICE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1.21 WHAT SOCIAL, CIVIC, PROFESSIONAL, TRADE, OR OTHER ORGANIZATIONS ARE YOU AFFILIATED WITH?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1.22 DESCRIBE ANY OFFICES YOU HAVE HELD IN ORGANIZATIONS LISTED ABOVE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1.23 DO YOU KNOW ANYONE ON THIS JURY PANEL?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1.24 ON HOW MANY CASES HAVE YOU SERVED ON A JURY? \_\_\_\_\_

WHERE DID YOU SERVE ON A JURY? \_\_\_\_\_

WHAT KINDS OF CASES DID YOU HEAR WHILE SERVING ON A JURY?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IN HOW MANY OF THOSE CASES DID THE JURY REACH A VERDICT? \_\_\_\_\_

IN HOW MANY OF THOSE CASES DID YOU SERVE AS THE JURY FOREPERSON? \_\_\_\_\_

WAS YOUR JURY SERVICE A POSITIVE OR NEGATIVE EXPERIENCE? \_\_\_\_\_

1.25 IF YOU HAVE EVER BEEN TO COURT FOR ANY OTHER REASON (EXCLUDING DIVORCE), EXPLAIN:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



1.26 IF YOU PERSONALLY KNOW ANY JUDGES OR ATTORNEYS OR COURT PERSONNEL, WHAT ARE THEIR NAMES AND RELATIONSHIP TO YOU?

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1.27 DESCRIBE ANY PROBLEMS (VISION, HEARING, OR OTHER MEDICAL PROBLEMS) THAT MAY AFFECT YOUR JURY SERVICE:

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1.28 IF YOU OR ANYONE CLOSE TO YOU HAS EVER MADE ANY TYPE OF CLAIM FOR DAMAGES, EXPLAIN:

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1.29 IF A CLAIM FOR MONEY DAMAGES HAS EVER BEEN MADE AGAINST YOU OR ANYONE CLOSE TO YOU, EXPLAIN THE CIRCUMSTANCES:

---

---

---

1.30 IF YOU OR ANYONE CLOSE TO YOU HAS EVER SUED OR BEEN SUED IN ANY TYPE OF LAWSUIT, EXPLAIN:

---

---

---

1.31 DO YOU FEEL THAT MONEY DAMAGES AWARDED IN LAWSUITS ARE (CHECK ONE):

|  |   |
|--|---|
| <input type="checkbox"/> EXCESSIVE       | <input type="checkbox"/> OCCASIONALLY TOO LOW   |
| <input type="checkbox"/> OFTEN TOO LARGE | <input type="checkbox"/> OFTEN TOO LOW          |
| <input type="checkbox"/> ABOUT RIGHT     | <input type="checkbox"/> OTHER (SPECIFY): _____ |

1.32 IF YOU HAVE ANY ETHICAL, RELIGIOUS, POLITICAL, OR OTHER BELIEFS THAT MAY PREVENT YOU FROM SERVING AS A JUROR, EXPLAIN:

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1.33 IF THERE IS ANY MATTER NOT COVERED BY THIS QUESTIONNAIRE THAT COULD AFFECT YOUR ABILITY TO BE A FAIR AND IMPARTIAL JUROR, EXPLAIN:

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# JUROR QUESTIONNAIRE FOR CIVIL CASES

JURY-001

## Personal Injury Supplement

**FULL NAME:** \_\_\_\_\_

**2.1 IF YOU OR ANYONE CLOSE TO YOU HAS EVER BEEN INVOLVED IN AN ACCIDENT IN WHICH SOMEONE WAS INJURED, EXPLAIN:**

---

---

---

**2.2 PLACE A CHECK MARK ON THE APPROPRIATE LINE(S) IF YOU OR ANYONE CLOSE TO YOU HAS EVER BEEN EMPLOYED IN ANY CAPACITY BY ANY OF THE FOLLOWING TYPES OF BUSINESSES:**

YOURSELF    OTHER PERSON

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | ANY COURT IN THE STATE OF CALIFORNIA  |
| <input type="checkbox"/> | <input type="checkbox"/> | ATTORNEY, LAW FIRM, OR LAW OFFICE   |
| <input type="checkbox"/> | <input type="checkbox"/> | CLAIMS ADJUSTMENT, EVALUATION, REVIEW, SETTLEMENT, OR INVESTIGATION                             |
| <input type="checkbox"/> | <input type="checkbox"/> | ACCIDENT INVESTIGATION OR LAW ENFORCEMENT   |
| <input type="checkbox"/> | <input type="checkbox"/> | DISABILITY, HEALTH, LIFE, CASUALTY, OR ACCIDENTAL INJURY BENEFITS OR PROGRAMS                   |
| <input type="checkbox"/> | <input type="checkbox"/> | ECONOMICS, ACTUARIAL, OR INVESTMENTS  |
| <input type="checkbox"/> | <input type="checkbox"/> | HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD |

**2.3 IF YOU CHECKED ANY LINE IN THE PREVIOUS QUESTION (2.2), PLEASE STATE THE RELATIONSHIP OF THAT PERSON TO YOU, THE TYPE AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT:**

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**2.4 DO YOU HAVE ANY BELIEFS AGAINST AWARDING DAMAGES FOR PERSONAL INJURY, PAIN, OR SUFFERING?**

YES     NO

IF YES, EXPLAIN:

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**2.5 DO YOU OR ANY MEMBERS OF YOUR IMMEDIATE FAMILY OR HOUSEHOLD SEE A DOCTOR OR OTHER MEDICAL PRACTITIONER REGULARLY FOR ANY CONTINUING MEDICAL PROBLEM?**

YES     NO

IF YES, EXPLAIN:

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# JUROR QUESTIONNAIRE FOR CIVIL CASES

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JURY-001

## Verification

I, \_\_\_\_\_, (TYPE OR PRINT NAME), DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING RESPONSES I HAVE GIVEN ON THIS JUROR QUESTIONNAIRE, AND ON ANY ATTACHED SHEETS, ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date:



\_\_\_\_\_  
(SIGNATURE OF DECLARANT)

**California Judicial Council Template – Juror  
Questionnaire for Expedited Jury Trials**

# JUROR QUESTIONNAIRE

PLEASE PRINT ALL ANSWERS LEGIBLY

To facilitate the jury selection process, provide the requested information under penalty of perjury. The completed questionnaire will be reviewed by all parties. The questionnaire is a public record and may be open to public inspection. If you believe that any question requires an answer that is too sensitive (personal or private) to be included in the public record, you have the right to request a private hearing, rather than writing the answer on the form. If you prefer to discuss this outside of the presence of other jurors, circle the question and write "P" (for "private") in the space for the answer.

### General Information

- 1. **FULL NAME:** \_\_\_\_\_
- 2. Age: \_\_\_\_\_
- 3. Area, neighborhood, or community in this county where you generally live (*do not give your street address*):

HOUSE
  APARTMENT
  OWN
  RENT

- 4. Do you have children?  YES  NO  
 If yes, how many? \_\_\_\_\_ Ages: \_\_\_\_\_

### Employment

- 5. Are you employed?  YES  NO  
 If yes, occupation: \_\_\_\_\_ Current employer: \_\_\_\_\_

### Relationship Information

- 6. Are there other adults in your household?  YES  NO  
 If yes, their occupations: \_\_\_\_\_

### Education

- 7. High school graduate:  YES  NO  
 College graduate:  YES  NO  
 Postgraduate degree:  YES  NO
- 8. If college or postgraduate degrees, degrees obtained: \_\_\_\_\_

### Prior Jury Service

- 9. Have you served on a jury before?  YES  NO  
 If yes:  Civil  Criminal

### Other Experience

- 10. Have you, a relative, or a close friend ever sued anyone or been sued?  YES  NO  
 If yes, describe: \_\_\_\_\_

- 11. Do you or does anyone close to you have training or expertise in any of the following areas (*check all that apply*):  
 Evaluating claims for loss or damage
  Law enforcement  
 Law
  Accident reconstruction or biomechanics  
 Medicine
  Specialized training in \_\_\_\_\_

- 12. Is there any matter not covered by this questionnaire that could affect your ability to understand the proceedings or to be a fair and impartial juror?  YES  NO  
 If yes, describe: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the responses I have given on this questionnaire and on any attached sheets are true and correct to the best of my knowledge and belief.

Date: \_\_\_\_\_



(SIGNATURE OF JUROR)

For your protection and privacy, please press the Clear This Form button after you have printed the form.

Print this form

Save this form

Clear this form

**COLORADO**

12

**Juror Questionnaire**

**COMPLETE THIS QUESTIONNAIRE AND BRING IT WITH YOU ON THE DAY YOU REPORT**

(The juror questionnaire is not a public record)

|   |  |   |  |       |
|---|--|---|--|-------|
| NAME:   | AGE:   | DATE OF BIRTH:  | EDUCATION COMPLETED:<br><input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> COLLEGE<br><input type="checkbox"/> LESS THAN HIGH SCHOOL <input type="checkbox"/> POST GRAD |       |
| RESIDENCE ADDRESS:  | SEX:<br><input type="checkbox"/> FEMALE<br><input type="checkbox"/> MALE   | MARITAL STATUS:<br><input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED |  |       |
| MAILING ADDRESS:  | YOUR OCCUPATION:<br><input type="checkbox"/> REGULARLY EMPLOYED<br><input type="checkbox"/> SELF-EMPLOYED<br><input type="checkbox"/> UNEMPLOYED |   |  |       |
| CITY: COUNTY STATE ZIP  | SPOUSE'S OCCUPATION:   |   | NO. OF CHILDREN:   | AGES: |
| <input type="checkbox"/> CHECK IF THIS IS A NEW ADDRESS<br><input type="checkbox"/> CHECK IF THIS IS A NEW NAME   | PREVIOUS JUROR SERVICE:<br><input type="checkbox"/> YES <input type="checkbox"/> NO  | HOME TELEPHONE NUMBER:  | WORK TELEPHONE NUMBER:   |       |
| HAVE YOU EVER BEEN INVOLVED IN A COURT PROCEEDING OTHER THAN JURY SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE MARK ALL THAT APPLY:<br><input type="checkbox"/> INVOLVED NOW <input type="checkbox"/> IN THE PAST <input type="checkbox"/> CIVIL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> TRAFFIC <input type="checkbox"/> PARTY TO A CASE <input type="checkbox"/> WITNESS IN A CASE |  |   |  |       |
| I DECLARE THE INFORMATION GIVEN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND I ACKNOWLEDGE THAT WILLFUL MISREPRESENTATION OF A MATERIAL FACT IS A CLASS 3 MISDEMEANOR PUNISHABLE AS PROVIDED IN SECTIONS 18-8-613 and 18-1.3-501, COLORADO REVISED STATUTES.<br>SIGNATURE: DATE:  |  |   |  |       |

**LEGAL RIGHTS AND RESPONSIBILITIES**

Protection of juror's employment (Section 13-71-134, Colorado Revised Statutes):

An employer shall not threaten, coerce, or discharge an employee for reporting for juror service as summoned.

Penalties for failure to obey a juror summons (Sections 18-8-612 and 18-1.3-501, Colorado Revised Statutes):

A person who fails to obey a juror summons may be fined up to seven hundred fifty dollars, or imprisoned for up to six months, or both.



**CONNECTICUT**

**13**

**Statewide Juror Questionnaire**

# CONFIDENTIAL JUROR QUESTIONNAIRE

PLEASE PRINT

**Please complete and bring with you to court**

Juror ID: \_\_\_\_\_

The information which you provide will be used by the judge, lawyers, and litigants during the selection of a jury and will be held confidential unless the judge orders that it be disclosed.

|      |               |  |  |
|------|---------------|--|--|
| Name | Date of birth | Gender<br><input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X | Are you a resident of Connecticut?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|------|---------------|--|--|

|  |  |
|--|--|
| Are you a citizen OR permanent legal resident of the United States?<br><small>("Permanent legal resident" means you are not a US citizen but you are legally allowed to permanently live in the United States)</small><br><input type="checkbox"/> Yes <input type="checkbox"/> No | Education (select highest level completed)<br><input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6<br><input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17+ |
|--|--|

|  |                                  |
|--|----------------------------------|
| Marital status<br><input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Party to civil union <input type="checkbox"/> Divorced / separated <input type="checkbox"/> Widow or widower | What is your present occupation? |
|--|----------------------------------|

|                           |                                |                              |
|---------------------------|--------------------------------|------------------------------|
| By whom are you employed? | Former occupation (if retired) | Former employer (if retired) |
|---------------------------|--------------------------------|------------------------------|

If married, or a party to a civil union, state the full name, occupation and employer of spouse

If spouse is retired or deceased, state last occupation and employer

If you have ever been convicted of a criminal offense or have a pending charge of same, state the offense, date, and result below. Include motor vehicle charges other than parking tickets.

|   |   |
|---|---|
| Have you ever been party to a civil court action of any kind?<br>If "Yes", state <u>details</u> briefly. <input type="checkbox"/> Yes <input type="checkbox"/> No | Pursuant to General Statutes section 51-232(c) information concerning race and ethnicity is required solely to enforce nondiscrimination in jury selection. The furnishing of this information is not a prerequisite to being qualified for jury service. This information need not be furnished if you find it objectionable to do so. |
|---|---|

|  |   |
|--|---|
| Indicate if any of the following apply to you or any member of your family or household:<br><input type="checkbox"/> (A) Related to an attorney at law<br><input type="checkbox"/> (B) Ever held public office<br><input type="checkbox"/> (C) Ever been connected with any police department, court or other law enforcement agency<br><input type="checkbox"/> (D) Ever been connected with the business of investigating claims<br>If you selected any of the above, state <u>details</u> : | Indicate Race:<br><input type="checkbox"/> Alaska Native<br><input type="checkbox"/> Asian American<br><input type="checkbox"/> Black or African American<br><input type="checkbox"/> Native American<br><input type="checkbox"/> Native Hawaiian<br><input type="checkbox"/> Other Pacific Islander<br><input type="checkbox"/> White American<br><input type="checkbox"/> Other |
|--|---|

|   |  |
|---|--|
| Have you ever served on a jury or grand jury, State or Federal? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "Yes", state place: _____ Approximate date _____ | Do you identify as Hispanic or Latino?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

Indicate whether the jury you previously served on heard:  Civil  Criminal  or both

**Notice: Any false written statement made by you which you do not believe to be true and which is intended to mislead a public servant in the performance of an official function is punishable by a fine and/or imprisonment.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Under penalty of false statement)

**CONFIDENTIAL JUROR QUESTIONNAIRE**

C.G.S. § 51-232; P.A. 21-170 **PLEASE PRINT**

The information which you provide will be used by the judge, lawyers, and litigants during the selection of a jury and will be held confidential unless the judge orders that it be disclosed.

Name Date of birth Are you a resident of Connecticut?

Gender – Male - Female - X

Marital status What is your present occupation?

By whom are you employed? Former occupation (*if retired*) Former employer (*if retired*)

Marital status – Single – Married – Party to a civil union – Divorced or separated – widow or widower

By whom are you employed?

What is your present occupation?

If married, or a party to a civil union, state the full name, occupation and employer of spouse

If spouse is retired or deceased, state last occupation and employer

Education – select highest level completed 1- 12 12-17 +

If you have ever been convicted of a criminal offense or have a pending charge of same, state the offense, date, and result below.

Include motor vehicle charges other than parking tickets.

Have you ever been party to a civil court action of any kind?

If "Yes", state details briefly.

Indicate if any of the following apply to you or any member of your family or household:

(A) Related to an attorney at law

(C) Ever been connected with any police department, court or other law enforcement agency

(D) Ever been connected with the business of investigating claims

(B) Ever held public office

If you selected any of the above, state details:

Have you ever served on a jury or grand jury, State or Federal? If "Yes", state place:

Approximate date

Indicate whether the jury you previously served on heard: Civil Criminal or both

Pursuant to General Statutes section 51-232(c) information concerning race and ethnicity is required solely to

enforce nondiscrimination in jury selection. The furnishing of this information is not a prerequisite to being qualified for jury service. This information need not be furnished if you find it objectionable to do so.

Indicate Race:

Do you identify as Hispanic or Latino?

Yes No

Yes No

Yes No

Alaska Native

Asian American

Black or African American

Native American

Native Hawaiian

Other Pacific Islander

White American

Other

Yes

Date Signature (*Under penalty of false statement*)

**DELAWARE**

**14**

**Statewide Jury Summons with Qualification  
Questionnaire**



SUPERIOR COURT OF DELAWARE

SUMMONS FOR JURY SERVICE

REPORTING DATE: MAY 08, 2017
ADDRESS: 500 N. KING STREET 1ST FLOOR, SUITE 1800

JURY GROUP NO: #01
JURY TYPE: PETIT TRIAL

YOU ARE HEREBY SUMMONED TO REPORT FOR JURY SERVICES ON THE DATE AND TIME LISTED BELOW. PRIOR to coming to court, you must make employment and family arrangements in order to be available during the potential time frame needed for Jury Service. The Court has a very strict excuse policy and will not consider excusing an individual for service absent an extreme hardship or an extreme inconvenience.

THE EXCUSAL AND POSTPONEMENT REQUIREMENTS ARE LISTED ON THE BACK OF THIS SUMMONS.

\*\*\*\*\*SINGLE-PIECE 19464

Last Name, First Name

FOX RUN
BEAR DE 19701-2761

Date of Birth
1957



Either Complete and Return the Juror Qualification Questionnaire below OR SAVE POSTAGE and Complete the Questionnaire Online at https://courts.delaware.gov/juror.

- \* Use the QR Code to the right to navigate your smartphone to the Court's website\*
\*See reporting and parking instructions at https://courts.delaware.gov/juror\*



YOU MUST CALL BEFORE YOU REPORT: AFTER 6:00 PM on the day before your reporting date, call the Jury Information Line for Group Reporting Instructions or for a possible change in your reporting instructions.

Your Reporting Date: MAY 08, 2017 8:30 AM

Your Call-In Number is: (302) 255-2491

Term of Service: NEW CASTLE COUNTY, ONE DAY OR ONE TRIAL TERM OF SERVICE

Please save the upper portion of this summons to bring with you when reporting for Jury Duty.

JUROR QUALIFICATION QUESTIONNAIRE OR SUBMIT ONLINE AT https://courts.delaware.gov/juror- RESPONSE WITHIN 7 DAYS REQUIRED

Form with fields for NAME, DATE OF BIRTH, SEX, EDUCATION COMPLETED, MARITAL STATUS, YOUR JOB TITLE & EMPLOYER, SPOUSE'S JOB TITLE & EMPLOYER, PRIMARY TELEPHONE NUMBER, RACE/ETHNICITY, ALTERNATE TELEPHONE NUMBER, NAME CHANGE, ADDRESS CHANGE, EMAIL ADDRESS.

ANSWER FOLLOWING QUESTIONS:

- 1. ARE YOU A RESIDENT OF NEW CASTLE COUNTY?
2. ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA?
3. ARE YOU ABLE TO COMMUNICATE IN THE ENGLISH LANGUAGE?
4. HAVE YOU EVER PLED GUILTY OR BEEN FOUND GUILTY OF A FELONY IN ANY STATE OR FEDERAL COURT?

IF YES, WHAT STATE? \_\_\_\_\_

WHAT COURT? \_\_\_\_\_ WHAT YEAR? \_\_\_\_\_

- 5. IF YES TO #4 ABOVE, WERE CIVIL RIGHTS RESTORED BY PARDON?
6. DO YOU REQUEST AN EXCUSAL FROM JURY SERVICE FOR ANY SERIOUS HARDSHIP?

Please provide a copy of the Pardon.

Medical requests must be accompanied by a doctor's note that details your condition. Employment deferments must be accompanied by a letter from your supervisor. If you have moved out of state, you must submit a copy of your new driver's license for that state. If you are not a citizen, you must submit a copy of your Alien Registration (Green) card, visa, or other legal documentation.

FOR MORE INFORMATION ON POSTPONEMENTS AND EXCUSALS SEE BACK

I DECLARE THE RESPONSES GIVEN ARE TRUE TO THE BEST OF MY KNOWLEDGE AND ACKNOWLEDGE THAT A FALSE STATEMENT HEREIN IS PUNISHABLE BY A FINE OF NOT MORE THAN \$100 OR IMPRISONMENT OF NOT MORE THAN 3 DAYS OR BOTH AS PROVIDED IN 10 Del. C. §4516.

SIGNATURE DATE
LEGAL RIGHTS AND RESPONSIBILITIES
Protection of juror's employment (10 Del. C. §4515.): An employer shall not threaten, coerce, or discharge an employee for reporting for juror service as summoned.



**ALL JURORS:**

1. Complete and sign the Juror Qualification Questionnaire OR submit the Questionnaire electronically at <https://courts.delaware.gov/juror> (NOT BOTH). **If you complete the Questionnaire online, you do not need to mail the paper questionnaire.**
2. If you complete the paper Questionnaire, detach it from the Summons.
3. Mail the paper Questionnaire in the envelope provided.
4. Keep the top portion of the Summons to bring with you when you report for jury duty.

**DISABILITIES:** Accommodations are available for jurors with disabilities. Call (302) 255-0824 to request an auxiliary aid or service. TTY users should call the Delaware Relay Service Number 1-800-232-5460 for assistance.

**LLWJC POLICY ON PERSONAL COMMUNICATION DEVICES:** Please do not bring any type of cell phones, radios, cameras or electronic devices with you. These prohibited items are also listed at <https://courts.delaware.gov/juror>.

**Food and medication are allowed in the courthouse with proper documentation (doctor's note).**

**POSTPONEMENTS:** If you are unable to attend court on the date indicated in this summons due to extreme hardship or extreme inconvenience and require an alternate date, call (302) 255-0824 within 3 days of receipt of this summons. **Written verification may be required.**

The Questionnaire must be completed in order for us to consider any request to be excused. The submission of the completed Questionnaire and documentation may be submitted electronically or via U.S. Mail. Jurors who wish to be excused should follow the instructions outlined below. **Please note unless you receive a written excuse from the court, you are not excused and must follow the reporting instructions on the front of this summons.**

- If you wish to be excused for **MEDICAL** reasons, you must provide a doctor's note.
- If you wish to be excused for **WORK** reasons, you must provide a letter from your employer, stating why it would be hardship for the business if you report for jury duty. The letter should include whether your employer provides paid leave for jury duty.
- If you are a **STUDENT**, you must submit a copy of your class schedule or another document verifying your enrollment.
- If you are a **BUSINESS OWNER**, you must submit a copy of your business license.
- If you are **NO LONGER A DELAWARE RESIDENT**, you must submit documentation of your current residency such as a copy of your driver's license or a utility bill.
- If you are **NOT A CITIZEN**, you must submit a copy of your green card or other legal documentation.
- If you are **70 YEARS OF AGE OR OLDER**, you may decline jury service by completing the Questionnaire and writing **DECLINE** after question #6 on front of the Summons.

If there is any other reason why you cannot serve, please include an explanation with the completed Questionnaire so that we may consider your request.

-----  
Detach the lower portion of this form and return to the Jury Services Office.

**FAILURE TO COMPLETE THIS QUESTIONNAIRE, EITHER BY MAIL OR BY INTERNET SUBMISSION, AND/OR FAILURE TO APPEAR FOR SERVICE MAY RESULT IN A FINE AND/OR IMPRISONMENT FOR CONTEMPT OF COURT. 10 Del. C. §4516.**

**\*\*\*\*\* OFFICIAL COURT DOCUMENT \*\*\*\*\***  
**JUROR QUESTIONNAIRE AND SUMMONS**  
**IMMEDIATE RESPONSE REQUIRED**  
**COMPLETE ONLINE AT <https://courts.delaware.gov/juror> OR**  
**RETURN COMPLETED FORM IN ENVELOPE PROVIDED (NOT BOTH)**

**Use the QR Code below to navigate to the Court's website:**



**FLORIDA**

15

**Miami-Dade County – Juror Questionnaire**

# Snapshot Report

Juror ID :

Year of Birth:

Name :

Date:

---

**SnapShot Type : ON BEHALF**

Are you the person shown above?

# Snapshot Report

Juror ID :

Year of Birth:

Name :

Date:

---

Primary Tel No

Email

Confirm Email

Would you like to receive text notifications?

# Snapshot Report

Juror ID :

Year of Birth: .

Name :

Date:

---

Are you a citizen of the United States?

Are you a resident of Miami-Dade County?

Are you 18 years of age or older?

Have you ever been convicted of a felony?

Are you under prosecution for a crime?

# Snapshot Report

Juror ID :

Year of Birth:

Name :

Date:

---

Compensation - Select According to Key Above:

# Snapshot Report

Juror ID :

Year of Birth:

Name :

Date:

---

What part of Miami-Dade County do you reside?

How long have you lived in Miami-Dade County?

State your highest level of education

Employment Status:

Employer:

What is your Occupation?

Marital Status:

Do you have children?

List relationship, age, and occupation of persons that reside with you

Have you previously served on a jury trial?

Have you or a close friend or family member ever been the victim of a crime?

Have you ever been a witness in any trial?

Are you acquainted with anyone who is currently or formerly employed in the criminal justice system?

Have you or a close friend or family member ever been arrested or accused of a crime?

Have you or a member of your family ever sued or been sued?

Have you ever contested a claim for insurance benefits with an insurance company



**16**

**Duval County – Jury Summons with  
Qualification Questionnaire**

# TRIAL JURY SUMMONS and JUROR QUALIFICATION FORM

\*\*\*\*\* OFFICIAL COURT DOCUMENT \*\*\*\*\*

Name of Person being summoned:

GROUP NUMBER: 01  
DATE: MM/DD/YYYY  
TIME: 8:00 a.m.

You are hereby SUMMONED for jury duty before the presiding judge at 501 West Adams Street, Room 2379. Florida's jury selection law provides that jurors are selected at random from a fair cross section of citizens residing in Duval County. Under this law, your name has been selected from a consolidated list of licensed drivers or identification card holders from the Department of Highway Safety & Motor Vehicles from the County in which you reside. Your answers to the questions on the Juror Qualification Form will be evaluated to make sure you are eligible for jury service. In general, you must be at least 18 years of age, a citizen of the United States, and a resident of Duval County. If you are charged with or have been convicted of certain crimes, you may not be eligible to serve as a juror.

The Court adheres to a very strict excusal and rescheduling policy. Any request to be rescheduled or to be excused from jury service must be submitted to the Jury Services Department within 10 days of your service date along with your completed Juror Qualification Form.

Please be assured that the Court will make every effort to assist you in performing your responsibilities as a juror and to make your service as convenient as possible. Jury service is an important constitutional right, as well as a duty of citizenship, and we thank you for your participation. For more information please visit our website at [www.duvalclerk.com/jury](http://www.duvalclerk.com/jury) or contact our office at 904-255-2087 between 8:00a.m.and 5:00p.m. Monday through Friday.

## PART A – WHAT TO DO:

**STEP 1** – Read both sides of this document fully. It is both a SUMMONS for Jury Service and a Juror Qualification Form.

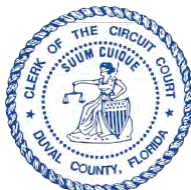
**STEP 2** – YOU MUST Complete the Juror Qualification Form within 10 days of your service date by one of the following two methods:

- a. Complete online at [jury.duvalclerk.com](http://jury.duvalclerk.com) ; OR
- b. Return the completed Juror Qualification Form by U.S. mail to the Jury Office

**STEP 3** – Follow the Reporting Instructions on the TRIAL JURY SUMMONS below.

**STEP 4** – Bring your TRIAL JURY SUMMONS when you report for Jury Service.

IIIIIIIIIBARCODEIIIIIIIIIIHEREIIIIIIIIII



**Duval County Clerk of the Circuit and County Court  
Jury Services  
501 W. Adams Street, Room 2401  
Jacksonville, FL 32202**



**AMERICANS WITH DISABILITIES ACT (ADA) NOTICE:**  
Individuals with disabilities who need a reasonable accommodation to participate in this proceeding are entitled, at no cost, to the provision of certain assistance. Please contact Court Administration, at 255-1000 within 2 working days of your receipt of this notice. If you are hearing or voice impaired please call: 1-800-955-8771.

IIIIIIIIIIIIIIIIIIII IIII IIIII IIIII barcode  
Summoned Name  
Address  
City State Zip code

IIIIIIIIII III IIIIIIIII IIII barcode

### TRIAL JURY SUMMONS

**Bring this with you on your date of service**

YOU ARE HEREBY SUMMONED for Jury Service for the trial term *beginning* on the Service Date noted on your badge to the right.

- LENGTH OF SERVICE: Your term of service includes the jury selection process and the time to conclude any trial you may be selected on to serve as a juror.
- VISIT [duvalclerk.com/jury](http://duvalclerk.com/jury) or call 904.255-2212 **after 6:00 p.m. the Friday before your Service Date** noted to the right. The website and the recording will explain whether your GROUP NUMBER must report and on what DAY/TIME if different from the summons. Please check again **after 6:00 p.m. the evening before your Service Date** to confirm your service is still required.
- ON THE DATE AND TIME of your service report to the Jury Assembly Room, Room 2379, on the second floor of the Duval County Courthouse.
- DO NOT bring any weapons of any kind to the Courthouse.
- CELL PHONES AND ELECTRONIC DEVICES are permitted in the Courthouse, however some areas may have limited or prohibited use.
- **PROPER ATTIRE IS REQUIRED.** The following is not acceptable attire: work uniforms, shorts, flip-flops, beach attire, athletic wear, revealing clothing, tank tops, exposed under garments or hats.

### BADGE

Jury Services  
501 West Adams Street, Room 2379  
Jacksonville, Florida 32202  
JUROR ID/BADGE NUMBER: 1234567890  
GROUP NUMBER: 01  
SERVICE DATE: MM/DD/YYYY  
TIME: 8:00 a.m.

IIIIIIIBARCODEII III III I

Please complete online at [www.duvalclerk.com/jury](http://www.duvalclerk.com/jury) or complete PART B below and return by U.S. Mail, failure to do so may result in court action. Check here if completed online:

**PART B – JUROR QUALIFICATION FORM**

|                            |                   |              |  |  |            |
|----------------------------|-------------------|--------------|--|--|------------|
| <b>1. Last Name</b>        | <b>First Name</b> | <b>MI</b>    | <b>2. Gender</b><br><input type="checkbox"/> Male<br><input type="checkbox"/> Female | <b>3. Date of Birth (mm/dd/yyyy)</b><br>/ /  | <b>Age</b> |
| <b>4. Resident Address</b> |                   |              |  | <b>5. Contact Information (include area code)</b>  |            |
| <b>City</b>                | <b>County</b>     | <b>State</b> | <b>Zip</b>   | Primary Phone _____  |            |
|                            |                   |              |  | Work Phone _____   |            |
| <b>6. Email</b>            |                   |              |  |  |            |
| <b>7. Your occupation</b>  |                   |              |  | <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired |            |
| <b>Name of Employer</b>    |                   |              |  |  |            |

For automatic receipt of E-Notifications for messages regarding your jury service, please check here:

If you opt to receive E-Notifications, please provide your cell phone provider: \_\_\_\_\_

Pursuant to Chapter 40.24 Florida Statutes, jurors who are regularly employed and who continue to receive regular wages while serving as a juror are not entitled to receive compensation from the state for the first 3 days of juror service. Jurors who are not regularly employed or who do not continue to receive regular wages while serving as a juror are entitled to receive \$15 per day for the first 3 days of juror service. Each juror who serves more than 3 days will be paid \$30 per day for the fourth day of service and each day thereafter, regardless of employment status.

- I am unemployed or not regularly employed.
- I will continue to receive regular wages from my employer while serving as a juror.
- I am employed, but my employer does not pay my regular wages while I am serving as a juror.
- I do not request compensation from the State for the first three days I serve as a juror.

According to Florida Statute 40.013, you may be excused for any of the reasons listed below.

**NOTE: Restoration of voting rights under Art. VI, § 4, Fla. Const., is NOT the same as restoration of all civil rights, including jury service. If you question whether your right to serve on a jury has been restored following a felony conviction, please contact the Office of Executive Clemency at [fpcweb.fcor.state.fl.us](http://fpcweb.fcor.state.fl.us)**

**Mandatory Disqualified:**

- I am under 18 years of age.
- I am not a citizen of The United States.
- I am a convicted felon and my civil rights have not been restored.
- I am currently under prosecution for a crime.
- I was previously summoned and served as a prospective juror in Duval County within one year (must provide proof of service if you served in Federal Court)
- I hold the position of Governor, Lieutenant Governor, Cabinet Officer, Clerk of Court, or Judge.
- I no longer reside in Duval County.

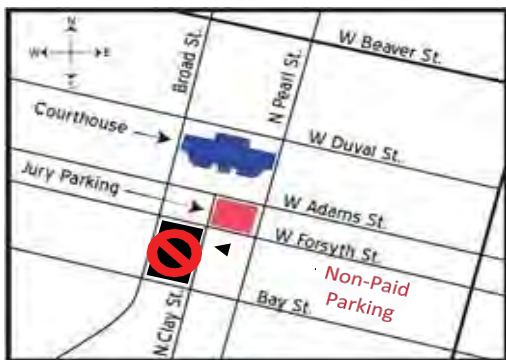
**Optional Exemption** (If you qualify for an exemption below and wish to be excused, please select the corresponding box)

- I am an expectant mother.
- I am 70 years of age or older.
- I am a parent not employed full-time and have the care and custody of a child under 6 years of age.
- I am a full-time student between 18 and 21 years of age.
- I am an unpaid sole caregiver of a person who is incapacitated mentally or physically.
- I am a full-time federal, state or local law enforcement officer or investigator employed by a law enforcement agency. Please list which agency: \_\_\_\_\_

If you have a significant scheduling conflict (i.e. prepaid vacation, business trip, etc.) you may take advantage of a one-time courtesy rescheduling on our website [jury.duvalclerk.com](http://jury.duvalclerk.com) or contact the Jury Services Department by mail or phone at 904-255-2087.

Section 837.06. Florida Statutes, makes it a misdemeanor of the second degree to "knowingly make a false statement in writing with the intent to mislead a public servant in the performance of his official duty." I certify under the penalty of perjury that I have read and understand the above information.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**\*\*\*\*\* OFFICIAL COURT DOCUMENT \*\*\*\*\***

Any person who fails to report for jury service or willfully misrepresents a material fact on a Juror Qualification Form for the purpose of avoiding or obtaining service as a juror may be subject to a fine and/or imprisonment for contempt of court in accordance with Florida Statute 40.23(3) and 837.06.

State Law prohibits discrimination or retaliation against an employee for taking time off to serve as a juror. Employers may not require an employee to use annual, sick or vacation leave to respond to a summons for jury service. Florida Statute 40.271.

For more information about Jury Services, or to complete this form online, please visit:

[www.duvalclerk.com/jury](http://www.duvalclerk.com/jury)

FREE PARKING is available to jurors in the Courthouse garage directly across the street from the Courthouse at the corner of N Clay Street and W Adams Street. As you enter the garage please take a parking ticket and proceed to the 5th and 6th floor of the garage. Lock your car and exit by elevator to the first floor and proceed to the Courthouse. **BRING THE PARKING TICKET WITH YOU for validation at check-in.** Payment will need to be made upon exiting the garage if you do not have a validated parking ticket. **DO NOT PARK AT A METER.** NOTE: Parking is NOT available in the garage for motorcycles, scooters, or oversized vehicles, including RVs.

17

**Lee County – Juror Questionnaire**

Case Id:

Title:  
Judge:

| Juror Name  | Gender: | Age:      | Phone: |
|---|---------|-----------|--------|
|   | Group:  | Badge: ** |        |
| 1. Are you a citizen of the United States?  |         |           |        |
| 2. Are you a legal resident of Lee County, FL?  |         |           |        |
| 3. Years of residence in Lee County, FL?  |         |           |        |
| 3a. If less than 2 years, prior City or State of residence  |         |           |        |
| 4. Are you 18 years of age or older?  |         |           |        |
| 4a. Marital Status?   |         |           |        |
| 5. Can you read, write, speak and understand English?   |         |           |        |
| 6. Education:   |         |           |        |
| 7. General Health:  |         |           |        |
| 7a. Hearing:  |         |           |        |
| 7b. Sight:  |         |           |        |
| 8. Have you ever been convicted of a felony?  |         |           |        |
| 8a. If yes, have your civil rights been restored?   |         |           |        |
| 9. Are criminal charges pending against you at this time?   |         |           |        |
| 10. Do you have any disability that would prevent you from serving on a jury:   |         |           |        |
| 10a. If yes, please explain how your disability restricts or limits your service:                                     |         |           |        |
| 11. Do you request to be excused from jury duty on the grounds that it would cause you economic or domestic hardship? |         |           |        |
| 11a. If yes, please explain:  |         |           |        |
| 12. Have you ever served as a juror before?   |         |           |        |
| 12a. If yes, When?  |         |           |        |
| 12b. Type:  |         |           |        |
| 13. Current occupation:   |         |           |        |
| 13a. If retired or unemployed, prior occupation:  |         |           |        |
| 14. Spouse's current occupation:  |         |           |        |
| 14a. If retired or unemployed, spouse's prior occupation:   |         |           |        |
| 15. Children's Ages:  |         |           |        |
| 15a. Adult children's occupations:  |         |           |        |
| 16. Do you have a family member, relative or close friend in law enforcement?   |         |           |        |
| 17. Have you, a family member or relative ever been the victim of a crime?  |         |           |        |
| 18. Have you, a family member or relative ever been accused of a crime?   |         |           |        |
| 19. Is the name and current address on your official jury summons correct?  |         |           |        |

**GEORGIA**

**18**

**Bibb County – Statewide Juror Questionnaire**

# STATE COURT OF BIBB COUNTY

## CONFIDENTIAL JUROR QUESTIONNAIRE

This questionnaire is confidential. Your responses will **not** be shared with anyone other than the parties, their attorneys, and the Court. Please provide truthful and complete answers, but your answers do not need to be overly detailed. Do not do any research or investigation into any topics raised in these questions. We simply want to get basic information from you in advance, so we can move through the jury selection process more quickly and efficiently.

1. Name

2. Gender

3. Where do you live in Macon-Bibb County? Indicate by Street Name or Area (East Macon, Lizella, Shirley Hills, etc.)

4. Age

18 - 22    23 - 30    31 - 40    41 - 50    51 - 65    Over 65

5. How long have you lived in Macon-Bibb County?

6. What is the highest level of education you completed?

7. If you attended school beyond high school, list the major area of study and/or degrees(s) earned.

0/500

8. Are you currently employed?

Yes    No

If yes:

What is your occupation?

Who is your employer?

How many years have you been in your present job:

Please provide a brief description of your job.

0/500

Do you supervise others at your job?

Yes  
 No

If yes, how many?

9. Have you ever owned or operated a business?

Yes    No

If yes:

What kind of business?

When and for how long?



10. List any primary jobs, other than your current job, that you have had as an adult:

0/500

11. If you are retired, from where are you retired?

12. Have you ever served in the military?

Yes  No

If yes:

What branch?

What was your main duty while in the service?

What was your highest rank?

When did you serve?

13. What is your marital status?

Married  Long-term relationship  Single  Widowed  Separated  Divorced

14. If married or in a long-term relationship,

How many years have you been married/in long-term relationship?

What is your spouse/partner's name?

What is your spouse/partner's occupation?

Where is your spouse/partner employed?

15. Do you have children?

Yes  
 No

If you do have children, how many?

16. Do you or any members of your immediate family have any legal education, training or experience?

Yes  No

If yes, explain.

0/500

17. Do you or any members of your immediate family have any medical education, training or experience?

Yes  No

If yes, explain.

0/500

18. Have you or any members of your immediate family ever been employed in or received training in the insurance field or risk management field?

Yes  No

If yes, explain.

0/500

19. Please identify your insurance carriers.

Home Owners/Renters

Automobile

Health Insurance

20. Have you ever been convicted or pled guilty or nolo contendere to a felony charge? (A felony is a crime for which the punishment could be a year or more in prison.)

Yes  No

If yes, explain.

0/500

Were you civil rights restored?

Yes  No

Date restored

21. Have you ever been the victim of a crime?

Yes  No

If yes, explain.

0/500

22. Have you ever been a party to a lawsuit?

Yes  No

If yes, briefly describe the type of lawsuit(s) and the outcome.

0/500

23. Other than as identified in response to the last question, have you ever had any claims asserted against you or have you ever asserted any claims against someone for personal injuries or property damage?

Yes  No

If yes, explain.

0/500

24. List religious, civic, community, professional, special interest, or political organizations in which you are a member:

0/500

25. Do you have any physical, mental, or medical condition that would impair your ability to serve as a juror?

Yes  No

If yes, explain.

0/500

---

I hereby certify that all of my answers on this CONFIDENTIAL JUROR QUESTIONNAIRE are true and correct to the best of my knowledge:

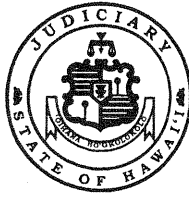
**FROM THIS POINT FORWARD AND UNTIL YOUR SERVICE AS A JUROR IS COMPLETED OR YOU ARE DISCHARGED AS A JUROR, DO NOT DISCUSS ANY OF THE PEOPLE OR TOPICS COVERED IN THIS QUESTIONNAIRE AND DO NOT DO ANY RESEARCH OR INVESTIGATION CONCERNING ANY OF THE PEOPLE OR TOPICS COVERED IN THIS QUESTIONNAIRE.**

Submit

**HAWAII**

19

**Information and Instructions for Jurors with  
Statewide Qualification Questionnaire**



## **CIRCUIT COURT OF HAWAII INFORMATION AND INSTRUCTIONS FOR JURORS**

DEAR CITIZEN:

YOUR NAME HAS BEEN RANDOMLY SELECTED FOR POSSIBLE JURY SERVICE IN THE NEXT YEAR. YOU WILL BE NOTIFIED WHEN TO APPEAR.

THE QUESTIONNAIRE ON THE REVERSE SIDE OF THESE INSTRUCTIONS WILL VERIFY YOUR QUALIFICATION TO SERVE AS A JUROR. **YOU ARE REQUIRED TO ANSWER EACH QUESTION, SIGN AND RETURN THIS FORM WITHIN TEN DAYS.**

IF YOU ARE UNABLE TO FILL OUT THIS FORM, SOMEONE ELSE MAY DO IT FOR YOU. THAT PERSON MUST STATE THE REASON WHY IT WAS NECESSARY TO HELP YOU ON LINE 12 OF THE QUESTIONNAIRE.

**HRS SECTION 612-6** GROUNDS FOR EXEMPTION. A PERSON MAY CLAIM EXEMPTION FROM SERVICE AS A JUROR IF THE PERSON IS:

- 1) AN ELECTED OFFICIAL WHILE THE LEGISLATURE IS IN SESSION, OR A JUDGE OF THE UNITED STATES, STATE, OR COUNTY;
- 2) AN ACTIVE PRACTICING PHYSICIAN OR DENTIST;
- 3) A MEMBER OF THE ARMED FORCES OR MILITIA WHEN ON ACTIVE SERVICE AND DEPLOYED OUT-OF-STATE;
- 4) AN ACTIVE MEMBER OF A POLICE OR FIRE DEPARTMENT;
- 5) A PERSON WHO HAS SERVED AS A JUROR, EITHER IN A COURT OF THIS STATE OR THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF HAWAII, WITHIN ONE YEAR PRECEDING THE TIME OF FILLING OUT THE JUROR QUALIFICATION FORM;
- 6) AN ACTIVE MEMBER OF AN EMERGENCY MEDICAL SERVICES AGENCY ("emergency medical services agency" means any government agency, private agency, or company that provides ambulance services, emergency medical services, or disaster medical services);
- 7) A PERSON LIVING MORE THAN SEVENTY MILES FROM THE COURT FOR WHICH JURY SERVICE IS REQUIRED;
- 8) A PERSON EIGHTY YEARS OF AGE OR OLDER.

IF YOU ARE CLAIMING AN EXEMPTION FROM JURY SERVICE UNDER HRS SECTION 612-6, PLEASE STATE WHICH PROVISION APPLIES TO YOU ON LINE 7 OF THE QUESTIONNAIRE.

EVEN IF YOU CLAIM AN EXEMPTION, YOU MAY STILL BE SUMMONED FOR JURY SERVICE AND ASKED TO PROVIDE FURTHER INFORMATION ABOUT YOUR CLAIMED EXEMPTION. SOME OF THE EXEMPTIONS ARE PREMATURE AT THIS TIME.

REQUESTS TO BE EXCUSED FROM JURY SERVICE DUE TO A PERSONAL HARDSHIP WILL BE CONSIDERED ONLY AT THE TIME YOU ARE SUMMONED TO APPEAR.



**Jury Pool Office - First Circuit Court**  
 THE JUDICIARY · STATE OF HAWAII  
 777 Punchbowl Street Honolulu, Hawaii 96813-5093  
 Phone: (808) 539-4360

**JURY QUALIFICATION QUESTIONNAIRE - FAILURE TO RESPOND MAY SUBJECT YOU TO PENALTY  
 PLEASE RETURN WITHIN TEN CALENDAR DAYS**

- USE A BLACK BALLPOINT PEN - DO NOT USE PENCIL
- FILL OUT FORM ON HARD SURFACE
- MAKE HEAVY BLACK MARKS THAT FILL IN THE BUBBLE COMPLETELY

|       |                       |                                  |
|-------|-----------------------|----------------------------------|
|       | YES                   | NO                               |
| RIGHT | <input type="radio"/> | <input type="radio"/>            |
| WRONG | <input type="radio"/> | <input checked="" type="radio"/> |

- Yes  No 1. Are you a citizen of the United States and of the State of Hawaii?
- Yes  No 2. Are you a resident of this judicial circuit (Island of Oahu)?
- Yes  No 3. Are you 18 years of age or older? State age:

**In responding to Questions 4 and 5, please consider that the Judiciary will provide reasonable accommodations consistent with the Americans With Disabilities Act.**

- Yes  No 4. Are you able to read, speak, and understand the English language?
- Yes  No 5. Are you incapable, by reason of your physical or mental disability, of rendering satisfactory jury service? If yes, submit a doctor's certificate.
- 
- Yes  No 6. Have you ever been convicted of a felony in a state or federal court and not pardoned? A felony means a crime punishable by imprisonment of more than one year, even if you did not receive more than one year.
- Yes  No 7. Do you claim an exemption from jury service under H.R.S. Section 612-6? If yes, fill in the bubble corresponding to the number that applies. **SEE REVERSE SIDE.**  
 1  2  3  4  5  6  7  8
- Yes  No 8. Have you ever served as a juror? If yes, what year? \_\_\_\_\_
- Yes  No 9. Have you or any member of your immediate family been a party to a law suit?
- Yes  No 10. Has a claim for personal injury ever been made against you or have you ever made a claim for personal injury?
- Yes  No 11. Are you related to, or close friends with any law enforcement officer?
- Yes  No 12. Did another person fill out this form for you? If yes, (1) reason: \_\_\_\_\_;  
 (2) name of person who filled out form: \_\_\_\_\_
13. List your present or last employer and occupation: \_\_\_\_\_
14. Marital Status:  Married  Single Home Phone: \_\_\_\_\_  
 No. of Children: \_\_\_\_\_ Business Phone: \_\_\_\_\_
15. Place of Birth: \_\_\_\_\_ Years of Residence in Hawaii: \_\_\_\_\_
16. Spouse's Name: \_\_\_\_\_ Spouse's Employer: \_\_\_\_\_
17. Education (circle highest level completed): Elem High School College Other
- Yes  No 18. Are your name and permanent address correct?  
 If "NO", please print appropriate corrections in the box below.

**FILL IN ONLY if your answer is "NO" to Question 18.**

|            |          |
|------------|----------|
| NAME       |          |
| ADDRESS    |          |
| CITY/STATE | ZIP CODE |

**I DECLARE THAT THE RESPONSES ON THIS QUESTIONNAIRE FORM ARE TRUE AND ACKNOWLEDGE WILLFUL MISREPRESENTATION OF A FACT IS SUBJECT TO PUNISHMENT BY LAW.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

JURY ID NO.

**IDAHO**



**20**

**Butte County – Jury Qualification Questionnaire**

# Jury Qualification Questionnaire

County of BUTTE

Please return this form to:  
Butte County Jury Commissioner  
P.O. Box 737  
Arco, Id 83213

**You must complete this Juror Questionnaire within 10 days from the date this form was mailed. If you cannot respond online, please complete, sign, and return this form by mail or submit via email to: *kgamett@buttecountyid.us***

You may be required to complete other jury questionnaires in the future.

In accordance with Idaho Law, you have been randomly selected for jury duty in BUTTE County. Your participation is vital and your contribution to this important process is appreciated.

A request to be EXCUSED or POSTPONED from jury service can be made in this questionnaire.

**Note:** Idaho Law provides that any prospective juror who fails to return this completed qualification questionnaire form as instructed shall be directed to appear before the clerk or the jury commissioner to complete the qualification questionnaire form. Prospective jurors who fail to appear as directed shall be ordered by the Court to appear and show cause for their failure to appear as directed, and may also be held in contempt of court.

Any person who willfully misrepresents a material fact on this qualification questionnaire for the purpose of avoiding or securing service as a juror is guilty of a misdemeanor.

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different than residence address): \_\_\_\_\_

Name or Residence Address Corrections: \_\_\_\_\_

One-way Mileage to Jury Reporting Location: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

**DISQUALIFICATIONS from Jury Service.** Please fill "yes" if any apply to you, and "no" for those that do not apply.

Yes No

\_\_\_\_ I am a citizen of the United States of America.

\_\_\_\_ I am a resident of BUTTE County.

\_\_\_\_ I am incapable by reason of a physical or mental disability, and with reasonable accommodation, of rendering satisfactory jury service. I will submit my physician's written statement certifying this condition to the jury commissioner.

\_\_\_\_ I have been convicted of a felony, and I am presently on probation/parole or I have not been restored to the rights of citizenship pursuant to Idaho Code §18-310: County and state where felony conviction occurred, if applicable (if you have not been convicted of a felony, please fill "NA"): \_\_\_\_\_

\_\_\_\_ I am unable to read, speak, and understand the English language.

please see other side

# Jury Qualification Questionnaire

## REQUEST TO BE EXCUSED FROM CURRENT JURY SERVICE:

Please fill "yes" if any apply to your request, and "no" for those that do not apply.

Yes No

\_\_\_\_\_ I am 70 years of age or older and wish to be permanently excused. I will submit a written request to the jury commissioner to be reinstated to the county jury list at a later if and when I wish to do so.

\_\_\_\_\_ Within the past 24 months, I have served on a jury or answered a roll call for Idaho jury service in state court.

County and number of days served, if applicable (if you have not served within the past 24 months, please fill "NA"): \_\_\_\_\_

\_\_\_\_\_ Within the past 24 months I have served on an Idaho grand jury in state court.

## REQUEST FOR POSTPONEMENT OF CURRENT JURY SERVICE:

Please fill "yes" if any apply to your request, and "no" for those that do not apply.

--- Please note that whether to grant such a request is discretionary with the Jury Commissioner and/or the judge.

Only one request for postponement may be granted for the shortest period of time reasonable under the circumstances, and the postponement must be to a time certain in the future at which time your name and juror number will be placed in the next available jury panel at which time you will receive a new notice.

Yes No

\_\_\_\_\_ I am a mother breastfeeding her child.

\_\_\_\_\_ I have a temporary medical condition for which I ask to have my jury service postponed. I will submit a physician's written statement certifying this condition if requested by the court or jury Commissioner.

\_\_\_\_\_ I request postponement of current jury service based upon an undue hardship, extreme inconvenience, or public necessity.

Reason for the postponement request and anticipated date (day/month/year) on which the reason for such postponement will no longer exist (if you are not requesting a postponement, please fill "NA"):

---

## DECLARATION OF PROSPECTIVE JUROR:

--- I certify that the responses on this questionnaire form are true to the best of my knowledge and I understand that a willful misrepresentation of a material fact may be punishable as a misdemeanor.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed on behalf of the prospective juror by: \_\_\_\_\_

Reason therefore: \_\_\_\_\_

**Please return this form to:** (Use the return envelope provided; fold this form so that the return address is showing and mail back to the court.)

Butte County Jury Commissioner  
P.O. Box 737  
Arco, Id 83213

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**Kootenai County – Jury Qualification  
Questionnaire**

# JURY QUALIFICATION QUESTIONNAIRE—KOOTENAI COUNTY IDAHO

YOU MUST COMPLETE, SIGN, AND RETURN THIS QUESTIONNAIRE WITHIN 10 DAYS FROM THE DATE THIS FORM WAS MAILED. PLEASE RETURN THIS FORM IN THE ENVELOPE PROVIDED, OR SUBMIT IT ELECTRONICALLY (THE JURY COMMISSIONER'S EMAIL ADDRESS IS [KJURY@KCGOV.US](mailto:KJURY@KCGOV.US)). YOU MAY BE REQUIRED TO COMPLETE OTHER JURY QUESTIONNAIRES IN THE FUTURE.

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

Juror Name  
Address  
City, State, Zip

Reporting#:  
GroupOrderSelected  
Juror ID #:

In accordance with Idaho Law, you have been randomly selected for jury duty in Kootenai County. Your participation is vital and your contribution to this important process is appreciated. Note:

Idaho Law provides that any prospective juror who fails to return this completed qualification questionnaire form as instructed shall be directed to appear before the clerk or the jury commissioner to complete the qualification questionnaire form. A prospective juror who fails to appear as directed shall be ordered by the Court to appear and show cause for the failure to appear as directed, and you may also be held in contempt of Court. Any person, who willfully misrepresents a material fact on this qualification questionnaire for the purpose of avoiding or securing service as a juror is guilty of a misdemeanor.

1.  YES  NO I am **70 years of age or older** and wish to be permanently excused from jury duty.
2.  YES  NO Are you at least 18 years of age? Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_
3.  YES  NO Are you a citizen of the United States?
4.  YES  NO Are you a resident of Kootenai County?
5.  YES  NO Do you read and understand the English language?
6.  YES  NO Have you ever been convicted of a FELONY?  
 YES  NO Are you currently on FELONY probation or parole?  
Crime \_\_\_\_\_ When/Where \_\_\_\_\_
7. Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_
8. Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
9. Street Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
10. What is the **one way** mileage from your home to the courthouse at **324 W Garden Ave, Coeur D'Alene, ID**? \_\_\_\_\_ miles
11. Home Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ Gender?
12. E-Mail Address: \_\_\_\_\_

**Completing the following information is voluntary. Its purpose is to expedite JURY PROCESSING.**

13. Driver's License #: \_\_\_\_\_ Years of Education? \_\_\_\_\_
14. Employer: \_\_\_\_\_ City: \_\_\_\_\_ Phone#: \_\_\_\_\_  
Your Occupation: \_\_\_\_\_ Your Position: \_\_\_\_\_
15. Marital Status: \_\_\_\_\_ Number of Children: \_\_\_\_\_ Ages: \_\_\_\_\_
16. Spouse's Employer: \_\_\_\_\_ Spouse's Occupation: \_\_\_\_\_
17. You or family member ever party to a lawsuit?  yes  no If yes, what type of lawsuit? \_\_\_\_\_  
Location: \_\_\_\_\_ When? \_\_\_\_\_
18. You or family member ever suffer serious bodily injury?  yes  no Nature of injury: \_\_\_\_\_
19. You or family member related to a Police Officer?  yes  no Officer's Name: \_\_\_\_\_
20. Have you ever served as a juror?  yes  no When? \_\_\_\_\_ Where? \_\_\_\_\_
21. **IN CASE OF EMERGENCY NOTIFY:** Name \_\_\_\_\_ Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

**A REQUEST OF POSTPONEMENT FROM JURY SERVICE CAN BE MADE ON THE BACK OF THIS QUESTIONNAIRE.**



**DOCTOR'S CERTIFICATE**

**IF YOU HAVE A PERMANENT PHYSICAL OR MENTAL DISABILITY YOU MUST SUBMIT A DOCTOR'S CERTIFICATE ( SIGNED BY YOUR DOCTOR).**

I hereby certify that \_\_\_\_\_ is a patient under my care and suffers from a  temporary or  permanent (check one) physical or mental condition that would make service as a juror detrimental to the patient's health.

The anticipated release date for this temporary condition is: (date) \_\_\_\_\_.  
**Be sure to return the questionnaire with this form if you have a temporary condition.** I further understand that I may be subjected to inquiry by the court, at its discretion, regarding the status of this patient's condition.

Date \_\_\_\_\_ M.D.

Dr. Phone No. \_\_\_\_\_  
(Please print or type your name)

**COMPLETE THIS SECTION IF YOU FALL INTO ANY OF THE FOLLOWING CATEGORIES:**

\_\_\_\_ ACTIVE DUTY U.S .MILITARY \_\_\_\_\_ / \_\_\_\_\_  
(Branch) (Discharge Date)  
\_\_\_\_ FULL-TIME STUDENT \_\_\_\_\_ / \_\_\_\_\_  
(School) (Date of Graduation)

NAME: \_\_\_\_\_ JUROR ID # \_\_\_\_\_

**JUROR SERVICE POSTPONEMENT STATEMENT**

This section is to be used to request a temporary postponement due to personal situations that would make immediate jury service difficult (such as vacations, unusual work situations, nursing mothers, etc.). BE SURE TO COMPLETE YOUR QUESTIONNAIRE AND SUBMIT WITH THIS STATEMENT FILLED OUT TO THE BEST OF YOUR ABILITY.

Ordinarily, you will be called within the next 2 to 4 months. If you have a conflict, you can ask for a delay of up to six (6) months. If you need a delay, please give us a date that works best for you. Once a summons has been issued, only under extreme circumstances can this date be changed.

Dates Available: \_\_\_\_\_

NAME (Print) \_\_\_\_\_ Juror ID# \_\_\_\_\_

NOTES: \_\_\_\_\_

**DECLARATION OF PROSPECTIVE JUROR:**

I certify that the responses on this questionnaire form are true to the best of my knowledge and I understand that a willful misrepresentation of a material fact may be punished as a misdemeanor.

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed on behalf of the prospective juror by: \_\_\_\_\_

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**Teton County – Juror Questionnaire**



## The Seventh Judicial District Court of the State of Idaho for Teton County

Please note any name or address changes below:

|  |
|--|
|  |
|  |
|  |
|  |

Welcome to jury service. You are about to participate in our judicial process by serving as an on-call juror in Teton County Seventh Judicial District Court. Your participation is vital in helping ensure that the constitutional right to a trial by jury will guarantee the protection of life, liberty and property.

### Important features of the jury service program of Teton County.

1. The Juror Questionnaire on the other side of this form will be used to qualify you as a potential juror. This means that you will be "on-call" for the period indicated. There may be several jury trials during this period or there may be none. If you are called to serve for a particular jury, you will receive written notification prior to that trial. We will try to notify you as early as possible but generally you will only receive 10-14 days' notice.
2. If there are legal reasons why you should be disqualified, please check the appropriate line on the Juror Questionnaire.
3. Please answer all questions as accurately and completely as possible. There are penalties for lying on a jury qualification form.
4. If you are filling out this form for someone else because they have moved, are away at college, serving a mission, in the armed service, etc., please complete the section below and return it to us. We must have these forms returned. A phone call is not sufficient for us to excuse a person from jury service. We must have something in writing and signed in order for us to consider excusing someone.
5. **If you have any concerns please attach a letter.**

We hope that you find your jury service to be an interesting and rewarding experience.

Juror Questionnaire is on back of this page. Please complete and return within **10** days.

Please note this questionnaire can also be found on the county website [tetoncountyidaho.gov](http://tetoncountyidaho.gov)

### THIS SECTION TO BE COMPLETED AND SIGNED ONLY IF ANOTHER PERSON COMPLETES THE JUROR QUESTIONNAIRE FOR THE PROSPECTIVE JUROR

I \_\_\_\_\_, hereby declare that I filled out the juror questionnaire form for and on behalf of the above-named prospective juror for the following reasons: \_\_\_\_\_

Signature \_\_\_\_\_

Relationship \_\_\_\_\_



## JUROR QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS AND RETURN WITHIN 10 DAYS

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

Telephone: home \_\_\_\_\_ cell \_\_\_\_\_ work \_\_\_\_\_

Marital Status (Married/Single/Widow/Widower) # of children \_\_\_\_\_ children(s) ages (if under 18) \_\_\_\_\_

Your Employer \_\_\_\_\_ Your Occupation \_\_\_\_\_

Total # of years of education (including any college) \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Spouse's Employer \_\_\_\_\_ Spouse's Occupation \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Have you or any member of your immediate family ever been involved in a bodily injury lawsuit? If Yes, nature of injury \_\_\_\_\_ Where \_\_\_\_\_ When \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Have you or any member of your immediate family ever been a party to a lawsuit? If Yes, type of lawsuit \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Have you or any member of your immediate family ever been a defendant in any criminal action other than a traffic violation? If Yes, type of criminal action \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Are you related to, or a close friend of, any law enforcement officer? If yes, provide name(s) \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Have you previously served as a juror? If yes, Where \_\_\_\_\_ When \_\_\_\_\_

Yes \_\_\_ No \_\_\_ Do you drive an automobile?

MILEAGE ONE WAY TO COURTHOUSE FROM YOUR HOME \_\_\_\_\_

When/if you are summoned to appear would you like to be notified via text or Email in addition to regular mail? If so please provide us with the necessary information \_\_\_\_\_

### LEGAL DISQUALIFICATIONS-PLEASE CHECK ALL THAT APPLY:

\_\_\_ I am NOT a resident of Teton County

(must show proof of Non-Residency) Please enclose a copy of your Driver's License or Voter Registration

\_\_\_ I am NOT a citizen of the USA

(must show proof of Non-Citizenship) Please enclose a signed letter or a copy of your green card.

\_\_\_ I am NOT able to read, speak and understand the English language.

\_\_\_ I HAVE BEEN convicted of a felony in \_\_\_\_\_ county, State of \_\_\_\_\_ and my voting rights have not been restored.

\_\_\_ Within the past 2 years, I have served or attended court as a juror for at least 10 days in the 7<sup>th</sup> District Court of Teton County and wish to be excused.

\_\_\_ I AM 70 years of age or older and wish to be excused.

\_\_\_ Request for Medical Exemption: The State of Idaho does not recognize any MEDICAL EXCUSE from jury service except for severe medical problems which MUST BE SUPPORTED BY A DOCTOR'S CERTIFICATE, submitted with this questionnaire.

THE RESPONSES TO THE QUESTIONS ON THIS QUALIFICATION FORM ARE TRUE TO THE BEST OF MY KNOWLEDGE. I ACKNOWLEDGE THAT A WILLFUL MISREPRESENTATION OF A MATERIAL FACT MAY BE PUNISHABLE BY A FINE OF NOT MORE THAN THREE HUNDRED DOLLARS (\$300.00) OR BY IMPRISONMENT IN THE COUNTY JAIL FOR NOT MORE THAN TEN (10) DAYS OR BOTH.

**SIGN HERE** \_\_\_\_\_ **DATE** \_\_\_\_\_

RETURN COMPLETED QUESTIONNAIRE WITHIN 10 DAYS TO:

**Teton County Courts**

**150 Courthouse Dr #307 OR [courtdocs@co.teton.id.us](mailto:courtdocs@co.teton.id.us) OR fax 208-354-8496**  
**Driggs, ID 83422**

**JUROR QUALIFICATION QUESTIONNAIRE**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address of residence: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

One way miles to courthouse from your residence: \_\_\_\_\_

**DISQUALIFICATION from Jury Service.** Please check all that apply to you.

\_\_\_\_ I am NOT a citizen of the United States of America.

\_\_\_\_ I am NOT a resident of Teton County.

\_\_\_\_ I am incapable by reason of a physical or mental disability, and with reasonable accommodation, of rendering satisfactory jury service. [Anyone claiming this disqualification is required to submit a physician’s written certificate establishing such disability.]

\_\_\_\_ I have been convicted of a felony and I am presently on probation/parole:  
County where conviction occurred: \_\_\_\_\_ State \_\_\_\_\_  
( ) or I have not been restored to the rights of citizenship pursuant to Idaho Code §18-310.

**EXEMPTIONS FROM JURY SERVICE:** There are NO automatic exemptions from jury service.

**REQUEST TO BE EXCUSED FROM CURRENT JURY SERVICE:** Please check all that apply to your request.

\_\_\_\_ I am 70 years of age or older and wish to be excused.

( ) I also wish this excusal based upon my age to be permanent.

\_\_\_\_ I am a mother breastfeeding her child.

\_\_\_\_ Within the past 24 months, I have served on a jury or answered a roll call for jury service in \_\_\_\_\_ County, Idaho. I served \_\_\_\_\_ days.

\_\_\_\_ Within the past 24 months I have served on a grand jury.

**REQUEST FOR POSTPONEMENT OF CURRENT JURY SERVICE:** Please check all that apply to your request.

Please note that whether to grant such a request is discretionary with the jury commissioner and/or the judge.

Only one request for postponement may be granted for the shortest period of time reasonable under the circumstances, and the postponement must be to a time certain in the future at which time your name and juror number will be placed in the next available jury panel at which time you will receive a new notice.

\_\_\_\_ I have a temporary medical condition for which I ask to have my jury service postponed. My physician’s written statement certifying this condition and the expected duration of the medical condition is attached.

\_\_\_\_ I request postponement of current jury service based upon an undue hardship, extreme inconvenience, or public necessity. I am providing a written statement setting forth the reason for this request and the amount of time needed.

**DECLARATION OF PROSPECTIVE JUROR:** I certify that the responses on this questionnaire form are true to the best of my knowledge and I understand that a willful misrepresentation of a material fact may be punished as a misdemeanor.

Sign Here: \_\_\_\_\_ Date: \_\_\_\_\_

**Note:** Idaho law provides that any prospective juror who fails to return this completed qualification questionnaire form as instructed shall be directed to appear before the clerk or the jury commissioner to complete the qualification questionnaire form. A prospective juror who fails to appear as directed shall be ordered by the Court to appear and show cause for his failure to appear as directed, and you may also be held in contempt of Court.

**ILLINOIS**

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**Cook County – Juror Information Form**

**JUROR INFORMATION FORM**

(PLEASE TYPE OR PRINT IN INK)

|  |                             |
|--|-----------------------------|
| 1. DATE OF BIRTH:  | 2. AGE:                     |
| MONTH/DAY/YEAR   |                             |
| 3. YOUR OCCUPATION:  |                             |
| 4. YOUR EMPLOYER'S NAME:   |                             |
| 5. IS YOUR SPOUSE OR DOMESTIC PARTNER EMPLOYED?  | YES NO                      |
| 6. SPOUSE'S OR DOMESTIC PARTNER'S OCCUPATION:  |                             |
| 7. NUMBER OF CHILDREN:   | 8. THEIR AGES:              |
| 9. HAVE YOU EVER SERVED ON A JURY?<br>WHEN: WHERE:   | YES NO                      |
| 10. HAVE YOU EVER BEEN ACCUSED, A COMPLAINANT<br>OR A WITNESS IN A CRIMINAL CASE?                      | YES NO                      |
| 11. HAVE YOU EVER BEEN THE VICTIM OF A CRIME?  | YES NO                      |
| 12. HAS ANY MEMBER OF YOUR IMMEDIATE FAMILY OR A<br>VERY CLOSE FRIEND EVER BEEN THE VICTIM OF A CRIME? | YES NO                      |
| 13. HAVE YOU EVER BEEN A PARTY TO ANY LAWSUIT?   | YES NO                      |
| 14. HAS ANY MEMBER OF YOUR IMMEDIATE FAMILY<br>EVER BEEN A PARTY TO ANY LAWSUIT?                       | YES NO                      |
| 15. ARE YOU PRESENTLY A PARTY TO ANY CASE NOW<br>PENDING IN THE CIRCUIT COURT OF COOK COUNTY?          | YES NO                      |
| 16. HAVE YOU EVER BEEN INVOLVED IN AN ACCIDENT<br>WHERE ANY PERSON WAS INJURED?                        | YES NO                      |
| 17. YOUR HOME PHONE NUMBER:  | 18. YOUR WORK PHONE NUMBER: |

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE NOTE: FILL IN THIS FORM AND BRING IT WITH YOU WHEN YOU REPORT FOR JURY DUTY

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**Kankakee County – Jury Summons with Juror  
Information Questionnaire**





**OFFICE OF THE JURY COMMISSION**  
**KANKAKEE COUNTY COURTHOUSE**  
 450 EAST COURT STREET  
 KANKAKEE, ILLINOIS 60901  
 (815) 936-8400



**JUROR BADGE**  
**KANKAKEE COUNTY, ILLINOIS**

**JN2-**

JUROR ID  
 NUMBER

**JURY SUMMONS**

**914818**

KANKAKEE COUNTY JURY COMMISSIONERS:

THEODIS PACE  
 JAMES FAFORD  
 RONALD JACKSON

**GREETINGS:** You **MUST CALL** the Kankakee County Juror Information Management System at **815-936-8400** anytime after 5:00 P.M. on June 11, 2021. You will be informed by a recorded message what time you are to report on Monday, June 14, 2021.

**If you fail to report as ordered, the sheriff will serve you with a summons.**

**YOUR SERVICE DATE IS:**

JUNE 14 2021

**MONTH DAY YEAR**

THIS SUMMONS IS FOR ONE DAY OR ONE TRIAL

**BRING THIS SUMMONS WITH YOU ON YOUR APPEARANCE DATE**

**READ CAREFULLY AND COMPLETE THE QUESTIONS ON FRONT AND BACK AND BRING COMPLETED FORM WITH YOU WHEN YOU REPORT**

**JUROR INFORMATION QUESTIONNAIRE**  
 CONFIDENTIAL: NOT PUBLIC RECORD

NAME:

NUMBER:

1. YEARS OF RESIDENCE IN ILLINOIS \_\_\_\_\_ IN KANKAKEE COUNTY \_\_\_\_\_

2. PRIOR PLACE OF RESIDENCE \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

3. MARITAL STATUS:  MARRIED  SEPARATE  WIDOWER  
 SINGLE  DIVORCED  WIDOW NUMBER OF CHILDREN: \_\_\_\_\_

4. LIST ALL MEMBERS OF YOUR FAMILY RESIDING AT HOME: (ADULTS AND MINORS)

| RELATIONSHIP | AGE | OCCUPATION | EMPLOYER | LENGTH EMP |
|--------------|-----|------------|----------|------------|
|              |     |            |          |            |
|              |     |            |          |            |
|              |     |            |          |            |
|              |     |            |          |            |

5. YOUR OCCUPATION AND EMPLOYER \_\_\_\_\_

6. IF RETIRED, GIVE LAST OCCUPATION AND EMPLOYER \_\_\_\_\_

7. IF YOU ARE A WIDOW OR WIDOWER, GIVE LATE SPOUSE'S OCCUPATION AND EMPLOYER \_\_\_\_\_

8. DO YOU UNDERSTAND AND SPEAK ENGLISH? IF NOT, WHAT LANGUAGE DO YOU UNDERSTAND AND SPEAK? \_\_\_\_\_

9. ARE YOU CURRENTLY A PARTY IN ANY PENDING CASES? PLEASE EXPLAIN \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_



**IMPORTANT INFORMATION**

**NO CELL PHONES, PAGERS, CAMERA, PHONES,  
NO LAPTOP COMPUTERS OR ELECTRONIC DEVICES  
ARE ALLOWED IN THE COURTHOUSE**

**SECURITY**

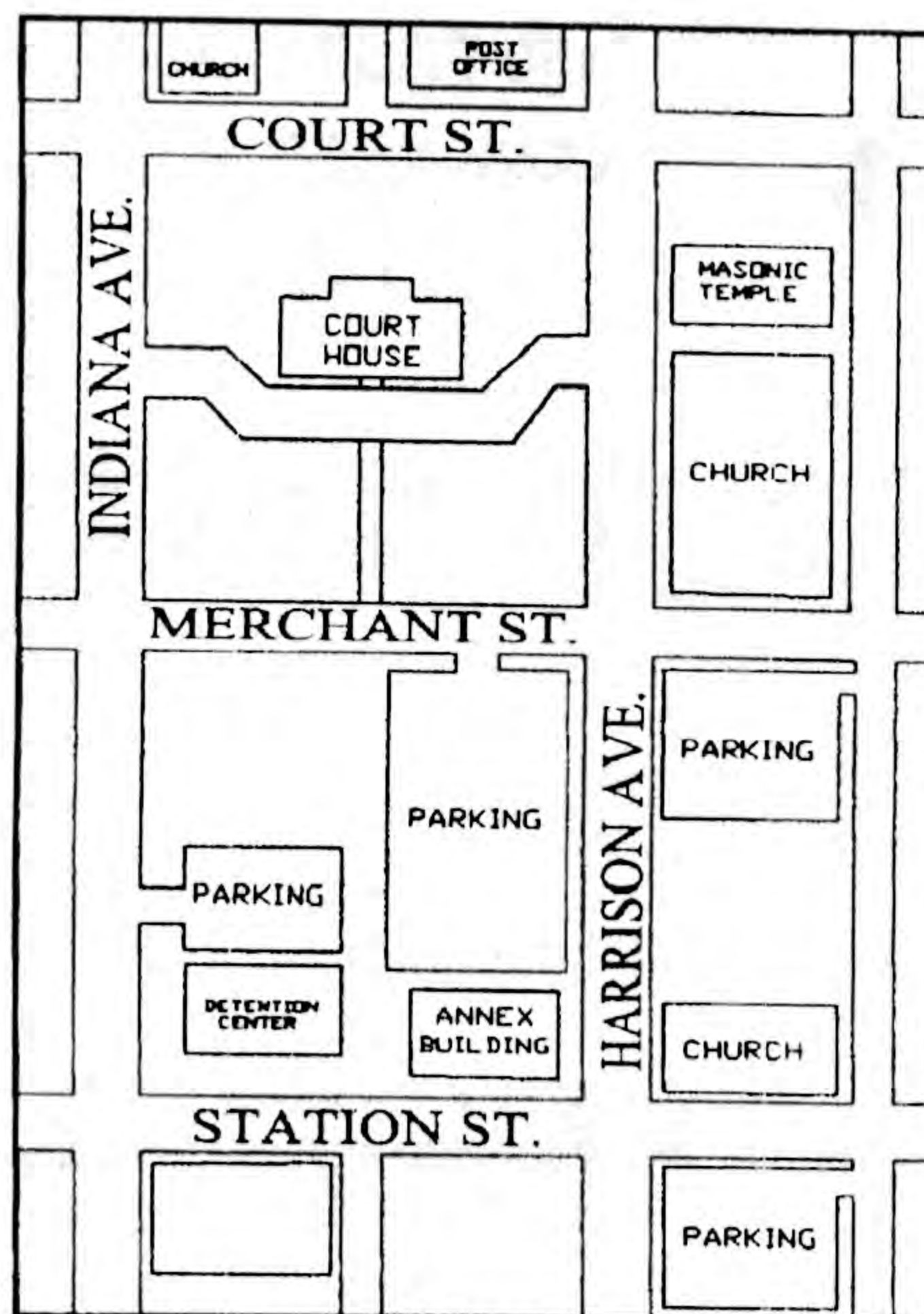
You must enter the Courthouse through the door on the north side and pass through the security check. After the security check, take the elevator to the Lower Level and follow the blue line to the Jury Assembly in room LL3. Due to security reasons you may be asked to return to your vehicle any items which could be used as a potential weapon. The following items are prohibited in building:

- |                 |                              |
|-----------------|------------------------------|
| Firearms        | PDA's                        |
| Cameras         | Pagers                       |
| Chemical Sprays | Knives                       |
| Large Scissors  | Video tape recorders         |
| Camera Phones   | Audio tape recorders         |
| Cell Phones     | Metal Point Tipped Umbrellas |

**JUROR RIGHTS**

You cannot be discharged by your employer for responding to a juror summons, so long as you provide a copy of this summons to your employer immediately upon receipt.

Petit Juror Handbook: <http://illnoiscourts.gov/CircuitCourt/Jury/Juror.asp>



You may park in the county lots located on the southeast and southwest corners of Merchant St. and Harrison Avenue or Station St. and Harrison Avenue if space is available.



**If you feel you may experience a justifiable hardship that might prevent or defer your jury service, YOU MUST CALL (815) 937-2978 as soon as you receive this summons and discuss the situation with the jury coordinator or email [jury@k3county.net](mailto:jury@k3county.net)**



*Trial by jury is a fundamental principle of our system of justice. Jury Service is therefore both an opportunity and an obligation of every United States citizen.*

**READ CAREFULLY AND COMPLETE THE QUESTIONS ON FRONT AND BACK AND BRING COMPLETED FORM WITH YOU WHEN YOU REPORT**

**JUROR INFORMATION QUESTIONNAIRE**  
CONFIDENTIAL: NOT PUBLIC RECORD



10. A) HAVE YOU SERVED AS A JUROR WITHIN THE LAST TWELVE (12) MONTHS?  YES  NO

WHEN AND WHERE? \_\_\_\_\_

11. A) HAVE YOU, MEMBERS OF YOUR IMMEDIATE FAMILY, OR CLOSE FRIENDS:

- A) EVER SUFFERED ANY BODILY INJURY?  YES  NO
- B) EVER BEEN IN AN AUTO ACCIDENT?  YES  NO
- C) EVER BEEN IN ANY OTHER KIND OF ACCIDENT?  YES  NO
- D) EVER SUFFERED ANY INJURY THAT REQUIRED HOSPITALIZATION?  YES  NO
- E) BEEN A VICTIM OF A CRIME?  YES  NO

12. A) HAVE YOU, OR ANY MEMBER OF YOUR IMMEDIATE FAMILY BEEN A PARTY TO ANY COURT PROCEEDINGS, CIVIL OR CRIMINAL?  YES  NO

B) IF SO, WHEN AND WHAT TYPE OF CASE? \_\_\_\_\_

13. HAS A CLAIM FOR PERSONAL INJURY EVER BEEN MADE AGAINST YOU, OR HAVE YOU EVER MADE ANY CLAIM FOR PERSONAL INJURY?  YES  NO

14. ARE YOU RELATED TO OR CLOSE FRIENDS WITH ANY LAW ENFORCEMENT OFFICER OR ATTORNEY?  YES  NO

15. DO YOU DRIVE AN AUTOMOBILE?  YES  NO

16. IF SO, NAME INSURANCE COMPANY \_\_\_\_\_





**OFFICE OF THE JURY COMMISSION**  
**KANKAKEE COUNTY COURTHOUSE**  
**450 EAST COURT STREET**  
**KANKAKEE, ILLINOIS 60901**  
**(815) 937-2978**

**IMPORTANT DIRECTIONS FOR MARKING ANSWERS & SIGNING THIS FORM USE EITHER A NO. 2 PENCIL OR BLACK OR BLUE INK PEN.**

FILL OUT FORM ON HARD SURFACE

MAKE HEAVY DARK MARKS

ERASE ANY CHANGES COMPLETELY

MAKE NO STRAY MARKS

DO NOT WRITE IN MARGIN OR IN OFFICIAL USE ONLY AREAS



FOR OFFICIAL USE  
JURORS: PLEASE DO NOT  
WRITE IN THIS SPACE

- QUAL
- XCUSE
- INELG.
- DEC
- MOVED



Comm \_\_\_\_\_

JUROR I.D. \_\_\_\_\_

IS YOUR NAME AND PERMANENT ADDRESS CORRECT?      YES      NO  
 IF "NO", MAKE CORRECTIONS ON REVERSE SIDE           

**JUROR QUALIFICATION QUESTIONNAIRE    PLEASE READ LETTER ON OTHER SIDE BEFORE COMPLETING**

**SECTION A**

**USING A NO.2 PENCIL OR BLACK OR BLUE INK PEN, FILL IN COMPLETELY YOUR RESPONSE TO EACH QUESTION.**

IF ANOTHER PERSON FILLS OUT THIS FORM, PLEASE INDICATE THAT PERSON'S NAME, ADDRESS AND REASON WHY IN REMARKS ON REVERSE.

- |  | YES                      | NO                       |
|--|--------------------------|--------------------------|
| 1) ARE YOU A CITIZEN OF THE UNITED STATES?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) ARE YOU 18 YEARS OF AGE OR OLDER?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) ARE YOU A CURRENT RESIDENT OF KANKAKEE COUNTY?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) DO YOU READ, WRITE, SPEAK AND UNDERSTAND THE ENGLISH LANGUAGE?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) ARE YOU A MEMBER IN ACTIVE SERVICE OF THE ARMED FORCES OF THE UNITED STATES?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) ARE YOU CURRENTLY CHARGED WITH COMMITTING ANY CRIMINAL OFFENCES INCLUDING A MINOR TRAFFIC TICKET? (IF ANSWER IS "YES", PLEASE EXPLAIN IN DETAIL IN REMARKS SECTION ON REVERSE SIDE.)                | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) HAVE YOU EVER BEEN CONVICTED OF A FELONY? A MISDEMEANOR? (IF ANSWER IS "YES", PLEASE EXPLAIN IN DETAIL IN REMARKS SECTION ON REVERSE SIDE.)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) ARE YOU CURRENTLY ON PROBATION OR PAROLE? (IF ANSWER IS "YES", PLEASE EXPLAIN IN DETAIL IN REMARKS SECTION ON REVERSE SIDE.)  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) ARE YOU A PARTY TO ANY LAWSUIT NOW PENDING IN KANKAKEE COUNTY? (IF ANSWER IS "YES", PLEASE EXPLAIN IN DETAIL IN REMARKS SECTION ON REVERSE SIDE.)   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) DO YOU HAVE ANY PHYSICAL OR MENTAL DISABILITY THAT WOULD INTERFERE WITH OR PREVENT YOU FROM SERVING AS A JUROR? (IF ANSWER IS "YES", PLEASE EXPLAIN IN DETAIL IN REMARKS SECTION ON REVERSE SIDE.) | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE  |                          |                          |
| 12. DATE OF BIRTH: MONTH _____ DAY _____ YEAR _____  |                          |                          |

13) RACE (based on U.S. Census Bureau definitions)  
**\*\*see note on reverse side\*\***

- WHITE: A person having origin in any of the peoples of Europe, North Africa, or the Middle East.
- AFRICAN-AMERICAN or BLACK: A person having origins in any of the black racial groups of Africa.
- AMERICAN INDIAN or ALASKAN NATIVE: A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.
- ASIAN or PACIFIC ISLANDER: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. These areas include, for example, China, India, Japan, Korea, the Philippine Islands and Samoa.
- OTHER or MULTIRACIAL: A person having origins other than those listed above OR a person having parents of different races.

14) ETHNICITY (based on U.S. Census Bureau definitions)

- HISPANIC or LATIN AMERICAN: A person having origins in any of the original people of Spain, Portugal, South America, Central America, Mexico, Puerto Rico, Cuba or the Caribbean Islands.
- NOT HISPANIC OR LATIN AMERICAN

15) SHOW THE EXTENT OF YOUR EDUCATION BY GIVING THE NUMBER OF YEARS COMPLETED?

| HIGH SCHOOL          | TRADE/VOCATIONAL     | ABOVE HIGH SCHOOL    |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

16) MARITAL STATUS:     Single     Married     Widowed     Divorced

17) YOUR HOME PHONE NUMBER: \_\_\_\_\_

18) I DECLARE UNDER THE PENALTY OF PERJURY THAT ALL ANSWERS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGN \_\_\_\_\_ DATE \_\_\_\_\_

**PLEASE TURN OVER TO COMPLETE THE REVERSE SIDE** →



**OFFICE OF THE JURY COMMISSION  
KANKAKEE COUNTY COURTHOUSE  
450 EAST COURT STREET, KANKAKEE, ILLINOIS 60901**

Monday - Friday 8:30 - 4:30

Telephone (815) 937-2978

**Trial by jury is a keystone of our system of justice. Jury service is therefore both an opportunity and an obligation of every American citizen.**

Dear Prospective Juror:

This is a questionnaire, not a summons for jury service. Your name has been drawn from a combined list of drivers/voters/identification card and Illinois disabled person ID cardholders of Kankakee County. You are being considered for jury service in the Kankakee County Circuit Court. This is a way of obtaining (for office/courthouse use only) some information about you from which we can objectively determine whether you are qualified to serve as a juror pursuant to state law. If we find you qualified, you may be summoned at a later date. Jurors will receive mileage and a per diem for each day of service.

If you are unable to fill out this form, someone else may do it for you provided that person indicates in remarks why it was necessary for him or her to do so instead of you.

Do not attach anything to this form. Please write your comments in the "Remarks" section or enclose a separate unattached document. Do not ask to be excused by telephone.

**If you do not return this questionnaire form fully completed within ten days, you are liable to be summoned to report at your expense for completion of the questionnaire at this office.**

**SECTION B**

19) THIS SECTION DESCRIBES CERTAIN CATEGORIES OF PERSONS WHO MAY BE EXCUSED FROM SERVICE AS A JUROR. IF YOU ARE A PERSON IN ONE OF THESE CATEGORIES AND YOU WISH TO BE EXCUSED, FILL IN COMPLETELY THE RESPONSE FOR THE LETTER OF YOUR CATEGORY HERE:

A       B       C       D       E

- A.) ARE YOU A PERSON WHO HAS SERVED AS A JUROR WITHIN THE LAST 12 MONTHS?
- B.) ARE YOU A PERSON WHO HAS ACTIVE CARE FOR AND CUSTODY OF A CHILD TWELVE (12) YEARS OF AGE OR YOUNGER WHOSE HEALTH OR SAFETY WOULD BE JEOPARDIZED BY YOUR ABSENCE FOR JURY SERVICE? (EXPLAIN FULLY UNDER REMARKS SECTION INDICATING CHILD(REN) AGE)
- C.) ARE YOU A PERSON WHO IS ESSENTIAL TO THE CARE OF AGED OR INFIRM PERSON? (EXPLAIN FULLY UNDER REMARKS SECTION LIST INFIRMITY AND RELATIONSHIP)
- D.) ARE YOU A PERSON WHOSE JURY SERVICE WOULD IMPOSE AN UNDUE HARDSHIP TO EITHER BUSINESS AFFAIRS OR OCCUPATIONAL TO THE EXTENT THAT THE BUSINESS WOULD CEASE IN YOUR ABSENCE? (EXPLAIN FULLY UNDER REMARKS SECTION.)
- E.) ARE YOU A PERSON WHOSE EMPLOYER DOES NOT REIMBURSE YOU FOR JURY SERVICE WHICH CREATES A FINANCIAL HARDSHIP?

**QUESTION 13 NOTE:**

RACE. SELECT THE CHOICE THAT BEST DESCRIBES YOUR RACE TO ASSIST IN ENSURING THAT ALL PEOPLE ARE REPRESENTED ON JURIES. NOTHING DISCLOSED WILL AFFECT YOUR SELECTION FOR JURY SERVICE. FEDERAL LAW REQUIRES NO RACE DISCRIMINATION IN THE JUROR SELECTION PROCESS. THIS ANSWER IS REQUIRED SOLELY TO AVOID DISCRIMINATION IN JUROR SELECTION AND HAS ABSOLUTELY NO BEARING ON QUALIFICATIONS FOR JURY SERVICE. BY ANSWERING THIS QUESTION YOU HELP THE CIRCUIT COURT TO CHECK AND OBSERVE THE JUROR SELECTION PROCESS SO THAT DISCRIMINATION CANNOT OCCUR. IN THIS WAY, THE CIRCUIT COURT CAN FULFILL THIS POLICY, WHICH IS TO PROVIDE JURORS WHO ARE RANDOMLY SELECTED FROM A FAIR CROSS SECTION OF THE COMMUNITY.

**NAME OR ADDRESS CORRECTION AND REMARKS**

USE SPACE BELOW TO COMPLETE ANY ANSWERS TO THE QUESTIONNAIRE WHICH REQUIRE MORE INFORMATION OR MORE SPACE. SHOW THE NUMBER(S) OF QUESTIONS OR LETTER(S) TO WHICH YOU ARE FURTHER RESPONDING.

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**INDIANA**

25

**Hendricks County – Juror Qualification Form**

Juror Number: \_\_\_\_\_  
(Please leave blank.)

## **2023 Juror Qualification Form for the Circuit and Superior Courts of Hendricks County**

This is not a summons for jury service.

Please return the completed Juror Qualification Form within 10 days of receipt in the self-addressed envelope provided.

|  |           |    |
|--|-----------|----|
| Are you a United States citizen?   | Yes       | No |
| Are you at least 18 years of age?  | Yes       | No |
| Are you a Hendricks County resident?   | Yes       | No |
| Are you able to read, speak, and understand English?   | Yes       | No |
| Are you suffering from a physical or mental disability that prevents you from rendering satisfactory jury service? If yes, please describe on reverse and attach statement from physician. | Yes       | No |
| Are you under a guardianship because of mental incapacity?   | Yes       | No |
| Has your right to vote been revoked and not restored because of a felony conviction?   | Yes       | No |
| Are you a law enforcement officer?   | Yes       | No |
| Occupation?  | Employer? |    |
| Have you ever served as a juror?   | Yes       | No |
| Have you ever sued anyone or been sued by anyone?  | Yes       | No |
| Have you or an immediate family member ever been the victim of a crime?  | Yes       | No |
| Have you ever been arrested, charged, or convicted of a crime that has not been expunged?  | Yes       | No |
| Have you or an immediate family member ever appeared or testified as a witness in any investigation or legal proceeding?   | Yes       | No |
| Are you or an immediate family member an employee of the Indiana Department of Correction who has contact with inmates?  | Yes       | No |

|  |     |    |
|--|-----|----|
| I am claiming an exemption from jury service, because I am 75 years of age or older.   | Yes | No |
| I am claiming an exemption from jury service, because I serve on active duty in the armed forces of the United States or the Indiana National Guard. | Yes | No |

I am unavailable for jury service on the following dates in **2023**. (Use reverse if necessary.)

| Date(s) | Reason(s) |
|---------|-----------|
|         |           |
|         |           |
|         |           |

|                                      |                |     |
|--------------------------------------|----------------|-----|
| Print Name                           |                |     |
| Address                              |                |     |
| City                                 | State          | Zip |
| Cell (preferred)                     | E-mail         |     |
| Landline                             |                |     |
| Roundtrip mileage to/from courthouse | DOB (MM/DD/YY) |     |

I affirm under penalty of perjury that the above statements are true.

|      |           |
|------|-----------|
| Date | Signature |
|------|-----------|

Questions? Please e-mail [chaines@co.hendricks.in.us](mailto:chaines@co.hendricks.in.us) or call (317) 718-6185.

**IOWA**

**26**

**Statewide Jury Summons with Jury  
Questionnaire**

Summonsing Court Location Name  
Court Address  
City Name, IA 00000



# Iowa Judicial Branch Official Summons



**\*NOT FOR OFFICIAL USE\***

SAMPLE A JUROR  
123 MAIN ST  
IOWA CITY, IA 52240-4877

**Group:** 1000

**Juror No.:** 1

**Juror ID:** A Unique 9-Digit Number

**Term of Service:** Varies by Location

**Start Date:** MM/DD/YYYY



OR SCAN ME

If your information above is incorrect, please correct below **OR** complete the questionnaire online at: [jury.iowacourts.gov](http://jury.iowacourts.gov)  
(If address is in a new county or out of state, please attach proof of address change, such as utility bill, lease, driver's license)

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_ To receive text notifications, list the cell phone carrier: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ (Messaging and data rates may apply)

Roundtrip miles from your home to the Courthouse: \_\_\_\_\_ Do you wish to receive compensation for jury duty?  
Yes  No  Mileage Only  (Verify with employer before declining payment)

## JURY QUESTIONNAIRE

Are you a resident of the State of Iowa? Yes  No  Are you a United States Citizen? Yes  No

In what county do you currently reside? \_\_\_\_\_ (please attach proof of non-citizenship, visa or green card information)

Do you understand the English language when written, spoken, **OR** manually signed? Yes  No

Are you able to receive and evaluate information to accomplish satisfactory jury service? Yes  No

Have you ever been convicted of a crime other than a traffic offense? Yes  No

If yes, explain: \_\_\_\_\_

Have you or any close friend or relative been a party or witness in a court case other than a divorce proceeding? Yes  No

If yes, explain: \_\_\_\_\_

Do you have a close friend or relative employed in law enforcement? Yes  No

If yes, explain: \_\_\_\_\_

Have you or any close friend or relative been a victim of a serious crime? Yes  No

If yes, explain: \_\_\_\_\_

Have you served as a juror before? Yes  No

Level of Education: \_\_\_\_\_ Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of Children: \_\_\_\_\_ Age(s) of Children: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Spouse's Occ: \_\_\_\_\_ Spouse's Emp: \_\_\_\_\_

**Your race, ethnicity, and gender information helps the court ensure jury panels are representative of the community.**

### Race (select all that apply)

- American Indian/Alaskan Native
- Native Hawaiian/Other Pacific Islander
- Asian
- Other
- Black/African American
- Unknown
- White

### Ethnicity

- Hispanic/Latinx/Spanish Origin
- Not Hispanic/Latinx/Spanish

### Gender

- Female
- Male
- Other

**Automatic exemptions are not allowed for reasons of inconvenience, hardship, or age.\***

First-time requests for postponements do not need to be for good cause. Subsequent requests for postponement must be for good cause. To request an exemption or postponement, indicate the reason below (please attach supporting documents):

\* There is not an exemption from jury service based solely on age. Exemptions must be based on some other good cause. An example of good cause would be pursuant to Iowa Code section 235F.1 concerning a "vulnerable elder;" "Vulnerable elder" means a person sixty years of age or older who is unable to protect himself or herself from elder abuse as a result of age or a mental or physical condition or because of a personal circumstance which results in an increased risk of harm to the person.

**I certify the foregoing information to be true and correct:**

X \_\_\_\_\_ (Signature) \_\_\_\_\_ (Date)



**KANSAS**

27

**Statewide Juror Questionnaire Template**

IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, KANSAS

You have been selected to serve as a juror in the District Court of \_\_\_\_\_ County. Kansas law requires you to answer the questions on this form and return it in the enclosed addressed, stamped envelope within the next seven days. The juror questionnaire is not a public record and is only made available to court personnel and the attorneys and parties to the case being tried. Your cooperation and willingness to serve as a juror are appreciated.

It is Judicial Branch policy to comply with the Americans with Disabilities Act. If you have questions or concerns about jury service or if you are a person with a disability needing a reasonable accommodation to serve on a jury, please contact the court clerk promptly after receiving the summons. The clerk may be contacted by telephone at (XXX) XXX-XXXX or via the Kansas Relay Center at (XXX) XXX-XXXX.

**JUROR QUESTIONNAIRE**

**IMPORTANT: Regardless of your personal situation, all Juror Questionnaires must be returned for processing in a timely manner!**

Name: \_\_\_\_\_

Last, First MI

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Length of residence in Kansas? \_\_\_\_\_

Length of residence in \_\_\_\_\_ County? \_\_\_\_\_

Home Ph: \_\_\_\_\_ Work Ph: \_\_\_\_\_

Cell Ph: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ Male \_\_\_\_\_ Female

\_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced

\_\_\_\_\_ Widower \_\_\_\_\_ Single

No. of Dependents: \_\_\_\_\_ Ages: \_\_\_\_\_

Circle highest grade of education completed:

6 7 8 9 10 11 12 GED +1 +2 +3 +4

Have you had vocational or professional training?

\_\_\_\_\_ No \_\_\_\_\_ Yes If yes, explain: \_\_\_\_\_

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

If retired, answer the preceding two questions with information from your last employment and check here: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's Occupation: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_

Have you or any member of your immediate family been party to any lawsuits? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, where and what type of lawsuit? \_\_\_\_\_

\_\_\_\_\_

Have you ever served on a civil jury? \_\_\_\_\_

Have you ever served on a criminal jury? \_\_\_\_\_

Round trip mileage from your residence to the courthouse? \_\_\_\_\_

**Statutory Qualifications** **Yes** **No**

Are you able to understand the English language? \_\_\_\_\_

Are you at least 18 years of age? \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_

Are you a resident of \_\_\_\_\_ County? \_\_\_\_\_

Has a court found you to be presently incompetent? \_\_\_\_\_

Have you been convicted or pleaded guilty or *nolo contendere* to a felony within the last 10 years? \_\_\_\_\_

Have you served as a juror in this county within the last 12 months? \_\_\_\_\_

Are you a breastfeeding mother? \_\_\_\_\_

If you believe you should be excused from serving as a juror, please state your reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I affirm that the answers I have given to the questions on this page are true and correct.**

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

**28**

**Miami County – Juror Questionnaire**

**Please answer all questions and return this form in the enclosed envelope within the next 2 days (ALL INFORMATION FURNISHED IS CONFIDENTIAL). \*please make necessary corrections to this address\***

Juror No. JurorNumber JurorName JurorMailingAddress JurorStreetAddress JurorMailingCity,  
JurorMailingState JurorMailingZip

Home phone: \_\_\_\_\_ Business: \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widower \_\_\_\_\_ Widow \_\_\_\_\_

Number of Dependents \_\_\_\_\_ Ages \_\_\_\_\_

Circle highest grade completed formal education: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4

Have you had vocation or professional training? Yes \_\_\_ No \_\_\_ If Yes, explain: \_\_\_\_\_

Length of residence in Kansas: \_\_\_\_\_ in Miami County: \_\_\_\_\_

Former residence \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Employer phone: \_\_\_\_\_ Address \_\_\_\_\_

If retired or not employed, fill in above three questions with information from last employment and check this box [ ]

Have you ever served as a juror: (circle one) Yes No If yes, circle type: Civil Criminal Both

Have you served on a jury in Miami County within the last twelve months? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you or any members of your immediate family been a party to any civil or criminal lawsuit?

\_\_\_ Yes \_\_\_ No. If yes, what type, who, when, and where, \_\_\_\_\_

**Spouse Information:**

Name \_\_\_\_\_ Occupation \_\_\_\_\_

Employer \_\_\_\_\_

**STATUTORY QUALIFICATIONS**

**circle one**

Are you at least 18 years of age?..... yes no

Are you a citizen of the United States? ..... yes no

Are you a resident of Miami County? ..... yes no

Are you able to read, write & understand the English language? ..... yes no

Have you ever been convicted of a felony? ..... yes no

If yes, when \_\_\_\_\_ and where \_\_\_\_\_

Do you drive an automobile? ..... yes no

If no, is transportation available? yes no

Has any court ever found you to be incompetent or incapacitated, ..... yes no

If yes, please explain in space below. If restored, give date.

Are you related to or a close friend of any law enforcement officer? .... yes no

Do you have any special needs for hearing, eyesight or movement? yes no

If yes, please explain in space below.

Are you currently a mother who is breastfeeding? yes no

Do you believe you should be excused from serving as a juror? ..... yes no

If yes, please give reason:

\_\_\_\_\_

I affirm that all answers are true and correct: Signature \_\_\_\_\_ Date \_\_\_\_\_

**KENTUCKY**

**29**

**Statewide Juror Qualification Form**



## JUROR QUALIFICATION FORM

**INSTRUCTIONS:**

1. **Complete ENTIRE form (both FRONT and BACK)**
2. **TYPE or PRINT LEGIBLY with DARK BALLPOINT PEN**
3. **SIGN and DATE back of form** in space provided
4. **Return form within 5 days to address shown on back of form**

|  |
|--|
| <b>Juror ID No.</b><br>For Office Use Only |
|--|

|   |     |   |   |  |        |             |          |
|---|-----|---|---|--|--------|-------------|----------|
| Last Name   |     | First Name and Middle Initial           |   | Maiden Name  |        | Name Called |          |
| Mailing Address (PO Box or Street Address where you receive mail) |     |   |   | City   | County | State       | Zip Code |
| Residence Address (if different from mailing address)             |     |   |   | City   | County | State       | Zip Code |
| Birth Date  | Age | Birth State                             | Marital Status  | Spouse's Full Name (Last, First, Middle Initial, Maiden) |        |             |          |
| Your Occupation (If retired, prior occupation)                    |     |   | No. of years with Employer:<br><input type="checkbox"/> Retired | Employer's Name & Address                                |        |             |          |
| Spouse's Occupation (If retired, prior occupation)                |     |   | No. of years with Employer:<br><input type="checkbox"/> Retired | Spouse's Employer's Name & Address                       |        |             |          |
| List Name, Relation & Age of Household Members                    |     |   |   |  |        |             |          |
| No. of Years You Have Resided in KY                               |     | No. of Years You Have Resided in County |   | Level of Education Completed                             |        |             |          |

**A. CHECK EACH STATEMENT THAT APPLIES TO YOU:**

1.  I am **not** a United States citizen.
2.  I am **under 18** years of age.
3.  I am **not** a resident of the county which summoned me.
4.  I cannot **speak** or **understand** the **English** language.
5.  I am **currently under indictment**.
6.  I am currently a participant in a **felony diversion** or **deferred prosecution** program.
7.  I am a **convicted felon** who has **NOT**:
  - A. Received a full pardon or full restoration of civil rights by the governor or other authorized person of the jurisdiction in which I was convicted; **or**
  - B. Received a partial pardon or partial restoration of civil rights expressly restoring the right to serve on a jury by the governor or other authorized person of the jurisdiction in which I was convicted; **or**
  - C. Had the felony conviction vacated, dismissed, and expunged pursuant to KRS 431.073 and I am not otherwise prohibited from serving on a jury.
8.  I have **served** as a juror in the past **24 months**. Provide specific details: Date of service: \_\_\_\_\_  
 Name and location of Court: \_\_\_\_\_

**B. PLEASE ANSWER THE FOLLOWING QUESTIONS:**

1. Have you or a family member made a claim for personal injury? Yes \_\_\_\_ No \_\_\_\_
2. Has a claim for personal injury been made against you or a family member? Yes \_\_\_\_ No \_\_\_\_  
 If "Yes," what kind of case was it? \_\_\_\_\_
3. Have you or a family member been party to a lawsuit? Yes \_\_\_\_ No \_\_\_\_  
 If "Yes," what kind of case was it? \_\_\_\_\_
4. Have you or a family member been a defendant, witness, or complainant in a criminal case? Yes \_\_\_\_ No \_\_\_\_  
 If "Yes," what year, county, and state? \_\_\_\_\_



**For Office Use Only**

Last 4 Digits of Social Security No.: \_\_\_\_\_

Last Name: \_\_\_\_\_ Juror No.: \_\_\_\_\_

Panel: \_\_\_\_\_

**C. IF THE PERSON COMPLETING THIS FORM IS NOT THE PERSON NAMED IN THE JUROR SUMMONS, PLEASE EXPLAIN:**

The person named in the JUROR SUMMONS:

- Died on \_\_\_\_\_ (date of death) in \_\_\_\_\_ (County), \_\_\_\_\_ (State).
- Moved to \_\_\_\_\_ (new address).
- Other \_\_\_\_\_ (specific details).

Preparer's Name (print): \_\_\_\_\_ Relationship: \_\_\_\_\_

**D. COMPLETE THIS SECTION ONLY IF YOU ARE SEEKING POSTPONEMENT, TO BE EXCUSED, OR AN ACCOMMODATION:**

- I request that my jury service be **POSTPONED** until \_\_\_\_\_, \_\_\_\_\_, 2\_\_\_\_\_, because (attach explanation):
- I ask to be **EXCUSED** from this term of jury service due to:  Undue Hardship  Extreme Inconvenience  Public Necessity because (attach explanation):
- I ask to be **PERMANENTLY EXCUSED** ("EXEMPTED")\* from jury service due to a **PERMANENT MEDICAL CONDITION** because (attach description of condition AND/OR doctor's note. Please note: this does not include a temporary medical condition)
- I am able to participate as a juror with an **INTERPRETER** or **ACCOMMODATION**. (describe your need and/or specific accommodation request): \_\_\_\_\_

**E. PLEASE PROVIDE THE FOLLOWING PHONE NUMBERS (INCLUDE AREA CODE) AND E-MAIL ADDRESS:**

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_  
 Cell/Other Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

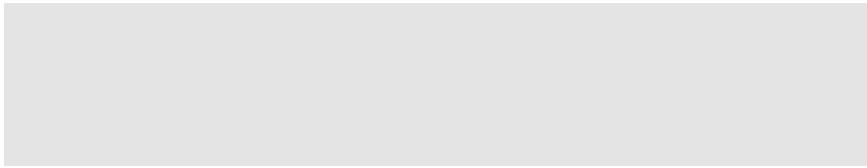
**Note: If your phone number is unlisted, you may place it on a separate sheet of paper and attach it to this form.**

**F. PLEASE REVIEW YOUR ANSWERS, READ THE FOLLOWING STATEMENT AND PROVIDE YOUR SIGNATURE:**

I certify the answers given in this Juror Qualification Form are true to the best of my knowledge. I acknowledge willful misrepresentation of a material fact is punishable as **contempt of court** and may result in a **fine, imprisonment or both**. KRS 29A.070(6).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**G. RETURN FORM TO:**



**TO BE COMPLETED BY CHIEF CIRCUIT JUDGE AND/OR DESIGNEE**

\_\_\_\_\_ **DISQUALIFIED** due to: \_\_\_\_\_ **EXCUSED** due to: \_\_\_\_\_ **POSTPONED** until:

- Not a U.S. Citizen  Undue Hardship
- Under age of 18  Extreme Inconvenience \_\_\_\_\_
- Not a resident of county or unable to locate  Public Necessity \_\_\_\_\_ Date
- Does not speak or understand English
- Under indictment

- In felony diversion or deferred prosecution \_\_\_\_\_ **QUALIFIED TO SERVE** \_\_\_\_\_ **PERMANENTLY EXEMPTED\*** due to:
- Convicted felon w/o pardon/restoration/expungement **WITHOUT EXCUSE**  Permanent Medical Condition
- Served within last 24 months  Death

DATE CHIEF CIRCUIT JUDGE'S DESIGNEE (if any) CHIEF CIRCUIT JUDGE'S SIGNATURE

\* **ONLY** the Chief Circuit Judge, and not a designee, can grant a permanent exemption from jury service. KRS 29A.080(3).

**NOTE: PERMANENT MEDICAL OR DEATH EXEMPTIONS THAT HAVE BEEN GRANTED MUST BE MAILED TO THE AOC, COURT SERVICES, 1001 VANDALAY DRIVE, FRANKFORT, KY 40601, FOR PURGING FROM THE MASTER JURY LIST.**

**LOUISIANA**

**30**

**East Baton Rouge Parish – Juror Questionnaire**

[Welcome](#)[Login \(login.asp\)](#)[FAQ \(main.asp?\)](#)[Help \(main.asp?\)](#)[\(main.asp?\)](#)[id=faq\)](#)[id=help\)](#)[id=index\)](#)

## JUROR QUESTIONNAIRE

PLEASE CONFIRM YOUR ANSWERS TO EACH QUESTION. IF ALL ANSWERS ARE TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE AND BELIEF, CLICK THE SUBMIT BUTTON TO COMPLETE ENTRY OF YOUR QUESTIONNAIRE. IF YOU NEED TO MAKE ANY CHANGES TO YOUR RESPONSES, PLEASE CLICK THE BACK TO QUESTIONNAIRE ENTRY BUTTON AT THE END OF THIS FORM.

### SECTION A QUALIFICATIONS

1. ARE YOU A CITIZEN OF THE UNITED STATES?

2. ARE YOU AT LEAST 18 YEARS OF AGE?

3. DO YOU READ, WRITE AND SPEAK THE ENGLISH LANGUAGE?

4. ARE YOU UNDER INTERDICTION OR ARE YOU INCAPABLE OF SERVICE BECAUSE OF ANY MENTAL OR PHYSICAL INFIRMITY?

IF YES, PLEASE EXPLAIN:

5. ARE YOU UNDER INDICTMENT FOR A FELONY, OR HAVE YOU BEEN CONVICTED OF A FELONY FOR WHICH YOU HAVE NOT BEEN PARDONED?

6. ARE YOU 70 YEARS OF AGE OR OLDER AND DO NOT WISH TO SERVE?

7. CITIZEN NAMED ON QUESTIONNAIRE DECEASED?

### CONFIDENTIAL INFORMATION

1. NAME: AGE:

ADDRESS:

2. IN ORDER TO COMPLY WITH LOUISIANA LAW, AND IN ORDER TO ENSURE THAT PERSONS ARE NOT BEING EXCUSED FROM JURY SERVICE ON THE BASIS OF RACE, SEC, OR AGE, YOU ARE REQUIRED TO FURNISH THE FOLLOWING INFORMATION:

RACE: SEX:

3. PLACE OF BIRTH (CITY AND STATE): NUMBER OF YEARS YOU HAVE LIVED IN EAST BATON ROUGE PARISH:

4. PRESENT OCCUPATION (PLEASE DESCRIBE WHAT YOU DO, YOUR JOB RESPONSIBILITIES, YOUR JOB TITLE, WHETHER YOU SUPERVISE OTHER EMPLOYEES,

**THE NAME OF YOUR EMPLOYER, THE LENGTH OF EMPLOYMENT AND YOUR JOB SKILLS AND TRAINING):**

|  |  |
|--|--|
|  |  |
|--|--|

**5. PREVIOUS OCCUPATION (GIVE THE SAME INFORMATION REQUESTED IN NO. 4):**

|  |  |
|--|--|
|  |  |
|--|--|

**6. IF YOU ARE MARRIED, PLEASE LIST YOUR SPOUSE'S OCCUPATION AND JOB DESCRIPTION:**

|  |  |
|--|--|
|  |  |
|--|--|

**7. PLEASE LIST THE NUMBER, GENDER, AGES AND OCCUPATIONS OF YOUR CHILDREN, IF ANY:**

|  |  |
|--|--|
|  |  |
|--|--|

**8. ARMED SERVICES EXPERIENCE, IF ANY - DATE AND BRANCH OF SERVICE, RANK, WHERE STATIONED, DUTIES PERFORMED, SPECIAL TRAINING, TYPE OF DISCHARGE:**

|  |  |
|--|--|
|  |  |
|--|--|

**9. WHAT POSITIONS OR OFFICES HAVE YOU HELD IN ANY CIVIC, CHARITABLE, OR RELIGIOUS ORGANIZATIONS, OR CLUBS ORGANIZATIONS, IF ANY:**

|  |  |
|--|--|
|  |  |
|--|--|

**10. ARE YOU NOW, OR HAVE YOU EVER BEEN A LAW ENFORCEMENT OFFICER (FEDERAL, MILITARY, STATE, PARISH, COUNTY OR CITY)?**

**IF YES, DESCRIBE YOUR POSITION AND WHEN YOU HELD IT:**

|  |  |
|--|--|
|  |  |
|--|--|

**11. DO YOU HAVE A CLOSE FRIEND OR RELATIVE WHO IS NOW OR HAS EVER BEEN A LAW ENFORCEMENT OFFICER?**

**IF YES, STATE THE PERSON'S NAME, RELATIONSHIP TO YOU AND WHAT**

**POSITION HE OR SHE HOLDS:**

**12. NUMBER OF YEARS OF EDUCATION: GRADE SCHOOL: COLLEGE:**

**13. HAVE YOU EVER BEEN THE VICTIM OF A CRIME?**

**IF YES, STATE WHAT CRIME, WHEN IT OCCURRED, AND THE RELATIONSHIP OF THE VICTIM TO YOU:**

**14. HAS ANY CLOSE FRIEND OR RELATIVE OF YOURS EVER BEEN THE VICTIM OF A CRIME?**

**IF YES, STATE WHAT CRIME, WHEN IT OCCURRED, AND THE RELATIONSHIP OF THE VICTIM TO YOU:**

**15. HAVE YOU EVER BEEN A WITNESS IN A CRIMINAL CASE (CITY, STATE, FEDERAL OR MILITARY)?**

**IF YES, STATE WHAT KIND OF CASE AND WHEN YOU TESTIFIED:**

**16. HAVE YOU EVER SERVED ON A GRAND JURY?**

**17. HAVE YOU EVER SERVED ON A JURY IN A CRIMINAL CASE?**

**18. HAVE YOU EVER SERVED ON A JURY IN A CIVIL CASE?**

**19. WHAT ARE YOUR HOBBIES?**

**20. WHAT NEWSPAPERS AND MAGAZINES DO YOU READ?**

**21. WHAT TYPE OF TV PROGRAMS DO YOU WATCH THE MOST?**

**22. DO YOU KNOW OF ANY REASON YOU COULD NOT SERVE AS A JUROR AND BE FAIR TO THE STATE AND THE DEFENSE IF YOU ARE SELECTED TO SERVE ON A JURY?**

**IF YES, PLEASE STATE THE REASON:**

---

---

**22. REMARKS: USE SPACE BELOW TO COMPLETE ANY ANSWERS TO THE QUESTIONNAIRE WHICH REQUIRE MORE INFORMATION. SHOW THE NUMBER(S) OF QUESTIONS OR LETTER(S) TO WHICH YOU ARE FURTHER RESPONDING.**

---

---

(If questionnaire was completed by someone other than , please state above why it was necessary for you to complete)

**23. Home Phone Number:**

**24. Cell Phone Number:**

**25. Email:**

Email will be used **ONLY** for notification of status of jurors need to appear.

**I declare under penalty of perjury that all answers are true to the best of my knowledge and belief.**

[Back to Questionnaire Entry](#)

[Submit Questionnaire](#)

**31**

**Orleans Parish – Juror Questionnaire**



## Questionnaire

Questions with required answers are marked with \*

\* 1. Home Phone Number - Answer required for this question.

2. Cell Phone Number

3. Emergency Phone Number

\* 4. How long have you been a resident of Orleans Parish?

\* 5. Date of Birth

|       |     |      |
|-------|-----|------|
| Month | Day | Year |
|-------|-----|------|

\* 6. Age

\* 7. Sex

\* 8. Your Occupation

9. Name of Employer

10. Business Phone Number

\* 11. Marital Status

\* 12. Are you a citizen of the United States of America?

|     |    |
|-----|----|
| Yes | No |
|-----|----|

## Questionnaire

Submit

\* 14. Have you ever been convicted of a felony?

Yes

No

**MAINE**

**32**

**Statewide Qualification Questionnaire  
for Jury Service**

**MAINE SUPERIOR COURT  
 QUALIFICATION QUESTIONNAIRE FOR JURY SERVICE  
 (YOU MUST COMPLETE THIS QUESTIONNAIRE AND RETURN IT WITHIN 5 DAYS)**

FOR COURT USE ONLY

HOME PHONE NO. \_\_\_\_\_  
 WORK PHONE NO. \_\_\_\_\_  
 CELL PHONE NO. \_\_\_\_\_

PRINT any changes in name or address below:  
 Last Name                      First                      M.I.

Address

City                                      State                      Zip

(Please place an "X" in the appropriate box) DOB: \_\_\_\_\_

- |  |  |  |
|--|--|--|
| 1. Are you a citizen of the United States?.....  | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> No                                |
| 2. Are you a resident of the county from which you received this Questionnaire?.....<br>If "NO", enter your county of residency: _____ | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> No                                |
| 3. Are you at least 18 years old?.....   | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> No                                |
| 4. Can you read, speak and understand the English language?.....   | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> No                                |
| 5. Are you 80 years of age or older?.....<br>IF "YES," do you wish to be excused from jury service?.....                               | <input type="checkbox"/> Yes<br><input type="checkbox"/> Yes | <input type="checkbox"/> No<br><input type="checkbox"/> No |

ADDITIONAL INFORMATION (Please check the appropriate box or fill in required information)

6. Have you served as a grand or traverse juror in the Maine Superior Court within the last five years?  Yes  No  
 If "YES", give date and location: \_\_\_\_\_  
 Although Maine law provides that you are not required to serve more than once during a five year period, you may choose to do so by checking this box.
7. Is your current mailing address located in the county from which you received this Questionnaire?  Yes  No
8. Occupation: \_\_\_\_\_ 9. Employer: \_\_\_\_\_
10. If retired or not presently employed, last occupation: \_\_\_\_\_
11. Gender:  Male  Female  Other 12. Date of birth: \_\_\_\_\_
13. Education: Last grade of school completed or highest degree received: \_\_\_\_\_
14. Marital Status:  Married  Domestic Partnership  Single
15. Spouse's/Domestic Partner's Occupation: \_\_\_\_\_
16. Spouse's/Domestic Partner's Employer: \_\_\_\_\_
17. Have you or any member of your family served in a Law Enforcement capacity?  Yes  No  
 Relationship: \_\_\_\_\_ When: \_\_\_\_\_
18. Are you unable to render satisfactory jury service because of physical or mental disability?  Yes  No  
 If "YES," please explain on reverse side. You are not automatically prevented from serving as a juror because of a disability. If you believe you are capable to serve as a juror, check "No". If you require any accommodation or auxiliary aids or services, please indicate those requirements on the reverse side.
19. Is there any reason why you cannot serve as a juror? (Use space on reverse side if necessary) \_\_\_\_\_
- 
20. Is there any particular time of the year when it would be impossible for you to serve? \_\_\_\_\_  
 Since you will be recalled for service within the next 12 months, you may indicate a time when it would be most convenient for you to serve: \_\_\_\_\_

I understand that false statements made on this form are punishable by law. Knowingly supplying false information on this form is a Class D offense under Title 17-A, punishable by confinement of up to one year or by a fine of up to \$2000, or both.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**MARYLAND**

**33**

**Montgomery County – Statewide Juror  
Qualification Form**





# SUMMONS and TRIAL JUROR QUALIFICATION FORM

\*\*\*\*\* OFFICIAL COURT DOCUMENT \*\*\*\*\*

ALL INFORMATION REQUESTED ON THE JUROR QUALIFICATION FORM (PART B) MUST BE PROVIDED.

Jane Doe

By order of the Montgomery County Circuit Court, you are hereby SUMMONED for jury duty. Maryland's jury selection law provides that jurors are selected at random from a fair cross section of citizens residing in Montgomery County. Under this law, your name has been selected from a consolidated list of registered voters from the Board of Elections and licensed drivers or identification card holders from the Motor Vehicle Administration. Your answers to the questions on the Juror Qualification Form will be evaluated to make sure you are eligible for jury service. In general, you must be at least 18 years of age, a citizen of the United States, a resident of Montgomery County, and be able to communicate in English.

Any citizen selected for a jury serves for the duration of one trial, however long that trial may be. Most trials last no more than three days, and an occasional trial will last a week or more. Anyone not selected for a trial may be dismissed at the end of the first day.

The Court adheres to a very strict excusal and rescheduling policy. Any request to be excused or rescheduled from jury service must be submitted in writing to the Jury Office within 10 days of receipt of this Summons along with your completed Juror Qualification Form and any required documentation. Maryland law recognizes no exemptions on the basis of occupation.

Please be assured that the Court will make every effort to assist you in performing your responsibilities as a juror and to make your service as convenient as possible. Jury Service is an important constitutional right, as well as a duty of citizenship, and we thank you for your participation. For more information, please visit our website [www.montgomerycountymd.gov/circuitcourt/jurors](http://www.montgomerycountymd.gov/circuitcourt/jurors) or contact the jury office at 240-777-9090 between 9:00 a.m. to 4:00 p.m., Monday through Friday.

*Robert A Greenberg*

ROBERT A. GREENBERG  
MONTGOMERY COUNTY ADMINISTRATIVE JUDGE

## PART A - WHAT TO DO:

- STEP 1** - Read both sides of this document fully. It is both a SUMMONS for Jury Service and a Juror Qualification Form.
- STEP 2** - YOU MUST Complete Juror Qualification form within 10 days of receipt by one of the following two methods:
  - a. Return the completed Juror Qualification Form (**Part B**) and all required documentation by U.S. mail to the Jury Office; **OR**
  - b. Complete online at <http://mdcourts.gov/jury>
- STEP 3** - Follow the Reporting Instructions as noted on the SUMMONS below.
- STEP 4** - Bring your SUMMONS with you when you report for Jury Service.



Jury Commissioner  
Montgomery County Circuit Court  
50 Maryland Avenue, Room 2100, North Tower  
Rockville, Maryland 20850  
240-777-9090

### PARKING AND PUBLIC TRANSPORTATION

Parking is on the corner of Jefferson and Monroe Streets. Alternate parking is available at the Council office building garage, which is directly across from the Jury lot. See jury website for additional information. DO NOT use metered parking. For information regarding public transportation in Montgomery county call 240-777-7433.

### INCLEMENT WEATHER POLICY

In the event of inclement weather, please call 240-777-9399 or go to [www.montgomerycountymd.gov/circuitcourt](http://www.montgomerycountymd.gov/circuitcourt) the morning you are scheduled to appear for weather related updates. If the information has not changed, report as scheduled. You may also follow updates on local television news and radio stations.

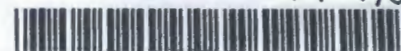
### JUROR ENTRANCE

Jurors are to enter via Maryland Avenue, Monroe Street or the Terrace level entrance.

### TRIAL JUROR SUMMONS

Term of Service: 1 Day or 1 Jury Trial

JUROR BADGE ID: 11177788



CALL-IN NUMBER: 172

SERVICE DATE: 10-05-2020  
TIME: 8:30 AM

REPORT TO: Montgomery County Circuit Court  
50 Maryland Avenue, Room 2100,  
North Tower  
Rockville, Maryland 20850

ALL JURORS MUST CALL 301-309-9351 OR VISIT [www.montgomerycountymd.gov/circuitcourt/jurors](http://www.montgomerycountymd.gov/circuitcourt/jurors) AFTER 5:00 P.M. THE EVENING BEFORE DATE OF SERVICE TO CONFIRM YOUR SERVICE.

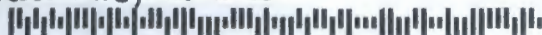
11177788

024865



Jane Doe  
1234 Blue House Drive  
Rockville, MD 20850

996



04-1977

11177788

## TRIAL JUROR SUMMONS

### REPORTING INSTRUCTIONS

Any citizen selected for a jury serves for the duration of one trial, however long that trial may be. Most trials last no more than three days, and an occasional trial will last a week or more. Anyone not selected for a trial may be dismissed at the end of the first day.

All jurors must call the juror information line at 301-309-9351 or visit the jury website at [www.montgomerycountymd.gov/circuitcourt](http://www.montgomerycountymd.gov/circuitcourt) after 5:00 p.m. on the evening before your date of service to determine whether you need to report on your service date. If your number does not fall within the range of numbers called in, you need not report. The recorded information is updated daily at 5:00 p.m. and it is important that you check ALL reporting instructions.

NO weapons of ANY kind are permitted on the premises of the courthouse. Possession and use of cell phones and other electronic devices are limited or prohibited in designated areas of the court facility.

PROPER ATTIRE is required. No uniforms, shorts, t-shirts with logos, athletic wear, or tank tops. No provisions are available for child care. Jurors may bring meals and medication. Accommodations to refrigerate items are available as is free WI-FI.



**PART B - JUROR QUALIFICATION FORM**

All sections must be completed thoroughly; failure to do so may result in further court action.

|  |                              |                     |  |  |                                     |
|--|------------------------------|---------------------|--|--|-------------------------------------|
| 1. Last Name<br><b>Doe</b>   | First Name<br><b>Jane</b>    | MI<br><b>A</b>      | 2. Gender<br><input type="radio"/> Male<br><input checked="" type="radio"/> Female | 3. Date of Birth (Month/Day/Year)<br><b>01011970</b> | Age<br><b>47</b>                    |
| 4. Resident Address:<br><b>1234 Blue House Drive</b>   |                              |                     | 5. Contact Information   |  |                                     |
| City:<br><b>Rockville</b>  | County:<br><b>Montgomery</b> | State:<br><b>MD</b> | Zip Code<br><b>20850</b>   | Home Telephone<br><b>1234567890</b>                  | Work Telephone<br><b>7777777777</b> |
| 6. <input checked="" type="radio"/> Married <input type="radio"/> Single <input type="radio"/> Divorced <input type="radio"/> Widowed  |                              |                     | 7. Email<br><b>JaneDoe@email.com</b>   |  |                                     |
| Spouse's Name:<br><b>John Doe</b>  |                              |                     | 8. Your Occupation<br><b>Jury Coordinator</b>                                      |  |                                     |
| Name of Employer<br><b>Circuit Court</b>   |                              |                     | 9. Spouse's Occupation:<br><b>Police Officer</b>                                   |  |                                     |
| 10. Education: <input type="radio"/> Did not receive HS diploma <input type="radio"/> High School or GED <input type="radio"/> 2 Years College <input checked="" type="radio"/> 4 Years College <input type="radio"/> Graduate School <input type="radio"/> Other: |                              |                     |  |  |                                     |

Answer statements (11-23) by filling in completely the appropriate Yes or No box, then sign, date and return PART B to the Jury Office. (See Documentation Code Legend below for additional instruction(s).)

- |                                  |                                  |  |
|----------------------------------|----------------------------------|--|
| Yes                              | No                               |  |
| <input checked="" type="radio"/> | <input type="radio"/>            | 11. I am a United States citizen. (Code A)   |
| <input checked="" type="radio"/> | <input type="radio"/>            | 12. I am a primary resident of the county from which I was summoned. (Code B)  |
| <input checked="" type="radio"/> | <input type="radio"/>            | 13. I am able to read, write, speak and comprehend the English language. (Code C)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 14. I am under 18 years of age. (Code H)   |
| <input type="radio"/>            | <input checked="" type="radio"/> | 15. I have pending charges against me punishable by a sentence exceeding 1 year (12 months). (Code D)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 16. I have been convicted of a crime and sentenced to more than 1 year (12 months) imprisonment and have not been legally pardoned. (Code E)   |
| <input type="radio"/>            | <input checked="" type="radio"/> | 17. I need an accommodation in accordance with the Americans with Disabilities Act (e.g. sign language interpreter, etc.). (Code F)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 18. I have a disability that prevents satisfactory completion of jury service. (Code G)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 19. I have served as a trial or grand juror within the last three years. (Please note: an individual who serves on a jury for fewer than 5 days in a 3-year period can be summoned for jury service after one year.) |
|                                  |                                  | Indicate dates served: _____ (Code H)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 20a. I am 70 years of age or older and wish to be temporarily exempt (or excused) from jury service. (Code H)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 20b. I am 70 years of age or older and wish to be permanently exempt (or excused) from jury service. (Code H)  |
| <input type="radio"/>            | <input checked="" type="radio"/> | 21. I am an active duty member of the armed forces and request an exemption in accordance with 10 U.S.C. Section 982. (Code I)   |
| <input type="radio"/>            | <input checked="" type="radio"/> | 22. I am a member of Maryland's organized militia and request an exemption in accordance with Public Safety Article Section 13-218. (Code I)   |
| <input type="radio"/>            | <input checked="" type="radio"/> | 23. I am an elected member of the federal legislative branch and request an exemption in accordance with 2 U.S.C. Section 30A. (Code J)  |

If for any other reason you feel you should be excused from service, follow Code J instructions below. If you have a significant scheduling conflict (i.e. prepaid vacation, business trip, etc.) you may take advantage of a one-time courtesy rescheduling on our website at <http://mdcourts.gov/jury> Alternatively, you may submit a written request with your completed questionnaire. You will receive written notification if your request is granted or denied.

I hereby certify under penalty of perjury that my responses to the above questions are true to the best of my knowledge.

Signature of Prospective Juror Jane Doe Date 10-05-2020  
 Signature of Individual Completing Form for Prospective Juror (See Code C) \_\_\_\_\_ Date \_\_\_\_\_

\*\*Detach the upper portion of this form and return to the Jury Office. Please save the lower portion to bring with you when reporting for jury duty.\*\*

\*\*\*\*\* **OFFICIAL COURT DOCUMENT** \*\*\*\*\*

Any person who fails to report for jury service or submit juror qualification information (either online or using the Juror Qualification Form) within 10 days after receipt of this summons or willfully misrepresents a material fact on a Juror Qualification Form for the purpose of avoiding or obtaining service as a juror may be subject to a fine and/or imprisonment in accordance with Md. Code Ann. CTS. AND JUD. PROC. Art., Sec. 8-503.

State Law prohibits discrimination or retaliation against an employee for taking time off to serve as a juror. Employers may not require an employee to use annual, sick or vacation leave to respond to a summons for jury service. Md. Code Ann. CTS. AND JUD. PROC. Art., Sec. 8-501 and Sec. 8-502.

**Documentation Code Legend** If documentation is required, you must send it in along with the Juror Qualification Form (PART B)

- Code A** - If NO: A copy of your resident alien card; green card; student visa; or work visa is required.
- Code B** - If NO: A copy of your new driver's license, or MVA issued state ID are acceptable to document your new address.  
If you do not have these forms of identification, contact the jury office from which you received the summons.
- Code C** - If NO to Question 13 OR If you are assisting an individual with the completion of the Juror Qualification Form then: A letter of explanation is required including a signature from the person assisting you with filling out the form. Please note the relationship to the individual summoned.
- Code D** - If YES: A copy of the official charging document or court notice is required.
- Code E** - If YES: A copy of the official record of the conviction is required.
- Code F** - If YES: A written statement requesting an accommodation, and specifying the type needed is required.
- Code G** - If YES: You must submit a written signed statement from your health care provider explaining that you are not able to satisfactorily perform jury duty.
- Code H** - If YES: You will receive notice from the court officially excusing your service.
- Code I** - If YES: A copy of your military orders, a copy of a letter from your commanding officer or a completed Certification of Military Exemption Form must be provided to the Court. The Form can be found at: <http://mdcourts.gov/jury> (DO NOT include social security number.)
- Code J** - If YES: A letter of explanation is required.

**34**

**Washington County – Statewide Juror  
Qualification Form**



\*\*\*\*\* **OFFICIAL COURT DOCUMENT** \*\*\*\*\*

Any person who fails to report for jury service or submit juror qualification information (either online or using the Juror Qualification Form) within 10 days after receipt of this summons or willfully misrepresents a material fact on a Juror Qualification Form for the purpose of avoiding or obtaining service as a juror may be subject to a fine and/or imprisonment in accordance with Md. Code Ann. CTS. AND JUD. PROC. Art., Sec. 8-503.

State Law prohibits discrimination or retaliation against an employee for taking time off to serve as a juror. Employers may not require an employee to use annual, sick or vacation leave to respond to a summons for jury service. Md. Code Ann. CTS. AND JUD. PROC. Art., Sec. 8-501 and Sec. 8-502.

**Documentation Code Legend** If documentation is required, you must send it in along with the Juror Qualification Form (PART B).

- Code A** - If **NO**: A copy of your resident alien card; green card; student visa; or work visa is required.
- Code B** - If **NO**: A copy of your new driver's license, or MVA issued state ID are acceptable to document your new address. If you do not have these forms of identification, contact the Jury Office from which you received the summons.
- Code C** - If **NO** to Question 13 OR if you are assisting an individual with the completion of the Juror Qualification Form then: A letter of explanation is required including a signature from the person assisting you with filling out the form. Please note the relationship to the individual summoned.
- Code D** - If **YES**: A copy of the charges or a letter listing the charges, dates and the jurisdiction where the charges are pending is required.
- Code E** - If **YES**: A copy of the charges or a letter of explanation listing the charges, the sentence, the date and the jurisdiction where you were convicted is required.
- Code F** - If **YES**: A written statement requesting an accommodation, and specifying the type needed is required.
- Code G** - If **YES**: A written signed statement from your healthcare provider explaining that you are not able to satisfactorily perform jury duty even with a reasonable ADA accommodation, and indicating the length of time you will be disabled is required.
- Code H** - If **YES**: You will receive notice from the Court officially excusing your service.
- Code I** - If **YES**: A copy of your military orders, a copy of a letter from your commanding officer or a completed Certification of Military Exemption Form must be provided to the Court. The Form can be found at: <http://mdcourts.gov/jury-service> (DO NOT include social security number.)
- Code J** - If **YES**: A letter of explanation is required.

Please visit <http://mdcourts.gov/jury-service> for additional information about jury service in Maryland.



**Kevin R. Tucker, Clerk**  
**Circuit Court for Washington County**  
24 Summit Avenue  
Hagerstown, MD 21740  
(Office) 301-790-7991, Option 1  
(Fax) 301-791-1151  
(Email) [washcocc\\_clerk@mdcourts.gov](mailto:washcocc_clerk@mdcourts.gov)

## WASHINGTON COUNTY PARKING INFORMATION

Please refer to our website or listen to our recorded juror line for up-to-date parking information:

WEBSITE:

[www.mdcourts.gov/clerks/washington/juryinfo](http://www.mdcourts.gov/clerks/washington/juryinfo)

RECORDED JUROR LINE: 301-739-3440

## TRIAL JURY SUMMONS

TERM OF SERVICE:  
**1 WEEK / 1 TRIAL**

### REPORTING INSTRUCTIONS

PLEASE NOTE: IF YOU ARE SELECTED FOR A MULTI-DAY TRIAL, SERVICE MAY EXTEND BEYOND YOUR SCHEDULED WEEK OF SERVICE.

YOU ARE HEREBY SUMMONED TO APPEAR FOR SERVICE AS A TRIAL JUROR ON THE DATE AND TIME SPECIFIED ON THE ATTACHED JUROR BADGE TO THE RIGHT. The term of service for Trial Jurors is one (1) week or one (1) trial. To avoid unnecessary appearances, please follow the instructions below:

Call the recorded message line at (301)739-3440 the **FRIDAY EVENING** prior to your week of service to see when your REPORTING NUMBER is scheduled to appear. Continue to call EVERY evening after 4:30pm during your week of service to receive reporting instructions for the following day. You must appear for service only if your REPORTING NUMBER is requested during your scheduled week. If you have been selected to serve on a jury trial, you are eligible for excusal once that ENTIRE trial has concluded.

BRING THE JUROR BADGE AND YOUR PHOTO ID TO COURT WITH YOU

You can view additional information on our website:  
<http://mdcourts.gov/clerks/washington/juryinfo.html>

NOTICE: NO weapons of ANY kind are permitted on the premises of the courthouse. Possession and use of cell phones and other electronic devices are limited or prohibited in designated areas of the court facility.

JUROR IDENTIFICATION NUMBER:

REPORTING NUMBER:

WEEK OF SERVICE:

TIME:

REPORT TO: **Washington County Circuit Court**  
**24 Summit Avenue, Room 212**  
**Hagerstown, MD 21740**

## JUROR BADGE

ALL JURORS MUST CALL (301)739-3440 after 4:30pm the **FRIDAY** BEFORE, and EVERY evening during your above-referenced week of service to listen for your reporting instructions.



Complete on-line at <http://mdcourts.gov/juryservice> or complete PART B and return by U.S. mail.

### PART B - JUROR QUALIFICATION FORM

**All sections must be completed thoroughly; failure to do so may result in further court action.**

|   |   |  |
|---|---|--|
| 1. Last Name _____<br>First Name _____<br>MI _____  | 2. Gender<br><input type="checkbox"/> Male<br><input type="checkbox"/> Female<br><input type="checkbox"/> Other | 3. Date of Birth _____ Age _____<br>Month _____ Day _____ Year _____                           |
| 4. Resident Address:<br><br>City: _____ County: _____ State: _____ Zip Code: _____  |   | 5. Contact Information<br>Home Telephone _____<br>Work Telephone _____<br>Cell Telephone _____ |
| 6. <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed<br>Spouse's Name: _____  |   | 7. Email _____   |
| 8. Your Occupation: _____<br>Name of Employer: _____  | <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired          |  |
| 9. Spouse's Occupation: _____   |   |  |
| 10. Education: <input type="checkbox"/> Did not receive HS diploma <input type="checkbox"/> High School or GED <input type="checkbox"/> 2 year College <input type="checkbox"/> 4 year College <input type="checkbox"/> Graduate School <input type="checkbox"/> Other: _____ |   |  |

Answer statements (11-23) by checking the appropriate Yes or No box, then sign, date and return **PART B** to the Jury Office.

(See Documentation Code Legend below for additional instruction(s).)

- Yes No**
11.  or  I am a United States citizen. (Code A)
12.  or  I am a primary resident of this County (Code B)
13.  or  I am able to read, write, speak and comprehend the English language. (Code C)
14.  or  I am under 18 years of age. (Code H)
15.  or  I have pending charges against me punishable by a sentence exceeding 1 year (12 months). (Code D)
16.  or  I have been convicted of a crime and sentenced to more than 1 year (12 months) imprisonment and have not been legally pardoned. (Code E)
17.  or  I need an accommodation in accordance with the Americans with Disabilities Act (e.g. sign language interpreter, etc) (Code F)
18.  or  I have a disability that prevents satisfactory completion of jury service, (Code G)
19.  or  I have served as a trial or grand juror within the last 3 years, (Please note: an individual who serves on a jury fewer that 5 days in a 3-year-period can be summoned for jury service after one year.)  
Indicate dates served: \_\_\_\_\_ (Code H)
- 20a.  or  I am 70 years of age or older and wish to be *temporarily* exempt (or excused) from jury service. (Code H)
- 20b.  or  I am 70 years of age or older and wish to be *permanently* exempt (or excused) from jury service. (Code H)
21.  or  I am an active duty member of the armed forces and request an exemption in accordance with 10 U.S.C. Section 982, (Code I)
22.  or  I am a member of Maryland's organized militia and request an exemption in accordance with Public Safety Article Section 13-218. (Code I)
23.  or  I am an elected member of the federal legislative branch and request an exemption in accordance with 2 U.S.C. Section 30A. (Code J)
- If for any other reason you feel you should be excused from service, follow Code J instructions below. If you have a significant scheduling conflict (i.e. prepaid vacation, business trip, etc.) you may take advantage of a one-time courtesy rescheduling on our website at <http://mdcourts.gov/juryservice>. Alternatively, you may submit a written request with your completed questionnaire. You will receive written notification if your request is granted or denied.

**I hereby certify under penalty of perjury that my responses to the above questions are true to the best of my knowledge.**

Signature of Prospective Juror \_\_\_\_\_ Date \_\_\_\_\_

Signature of Individual Completing Form for Prospective Juror (See Code C) \_\_\_\_\_ Date \_\_\_\_\_

# **SUMMONS and JUROR QUALIFICATION FORM**

**\*\*\*\*\* OFFICIAL COURT DOCUMENT \*\*\*\*\***


**ALL INFORMATION REQUESTED ON THE JUROR QUALIFICATION FORM (PART B) MUST BE PROVIDED.**

**You are hereby SUMMONED for jury duty.** Maryland's jury selection law provides that jurors are selected at random from a fair cross section of citizens residing in the County where the Court convenes. Under this law, your name has been selected from a consolidated list of registered voters from the Board of Elections and licensed drivers or identification card holders from the Motor Vehicle Administration from the County in which you reside. Your answers to the questions on the Juror Qualification Form will be evaluated to make sure you are eligible for jury service. In general, you must be at least 18 years of age, a citizen of the United States, a resident of the County noted on this summons, and be able to communicate in English. If you are charged with or have been convicted of certain crimes, you may not be eligible to serve as a juror.

The Court adheres to a very strict excusal and rescheduling policy. Any request to be rescheduled or to be excused from jury service must be submitted in writing to the Jury Office **within 10 days** of receipt of this Summons along with your completed Juror Qualification Form and any required documentation. Maryland law recognizes no exemptions on the basis of occupation. To support your request for disqualification or excusal, it is necessary to provide the requested documentation indicated on the opposite side of this form.

Please be assured that the court will make every effort to assist you in performing your responsibilities as a juror and to make your service as convenient as possible. Jury service is an important constitutional right, as well as a duty of citizenship, and we thank you for your participation. For more information please visit our website or contact the Jury Clerk at 301-790-7991, Option 1, between 8:00am and 4:30pm, Monday through Friday.

## **PART A - WHAT TO DO:**

  
HON. BRETT R. WILSON  
COUNTY ADMINISTRATIVE JUDGE

- STEP 1** – Read both sides of this document fully. It is both a SUMMONS for Jury Service and a Juror Qualification Form.
- STEP 2** – **YOU MUST Complete Juror Qualification form within 10 days of receipt by one of the following two methods:**
  - a. Return the completed Juror Qualification Form (**Part B**) and all required documentation by U.S. mail to the Jury Office; **OR**
  - b. Complete online at <http://mdcourts.gov/jury-service>
- STEP 3** – Follow the Reporting Instructions as noted on the SUMMONS below.
- STEP 4** – Bring your SUMMONS and JUROR BADGE with you when you report for Jury Service.

**MASSACHUSETTS**



**35**

**Statewide Jury Summons with Juror  
Confirmation Form**



# SUMMONS for JUROR SERVICE

You are hereby summoned to serve as a TRIAL JUROR commencing on:

WEDNESDAY SEPTEMBER 30, 2007 AT 8:30 AM  
FALMOUTH DISTRICT COURTHOUSE, 2ND FLOOR  
161 JONES ROAD, FALMOUTH, MA 02540

**VERY IMPORTANT: within 10 days of receipt,  
respond online at [www.MAJury.gov](http://www.MAJury.gov),  
or by mailing the Juror Confirmation Form. See other side for details.**

- You will receive a reminder notice about 10 days before your scheduled date with map and directions to the courthouse. Please notify us of any address change.

**BADGE NO. 0123456789**

**PIN: 123456**

- You may postpone your juror service, if necessary. (See Section 4 below.)

NAME  
ADDRESS  
CITY, STATE, ZIP-EXT

- A knowing failure to obey this summons without justifiable excuse is a crime, which is punishable by a fine of not more than \$2,000 upon conviction.



Jurors with accessibility concerns may call 1-800-THE-JURY (843-6679) so that necessary accommodations can be made.

- Please **keep this card** and refer to your **BADGE NO.** whenever contacting us.

### IMPORTANT:

Please read the "Juror Instructions and Information" brochure, then respond:

- Log on to our website and complete the Form online at [www.MAJury.gov](http://www.MAJury.gov).
- OR
- Complete, detach, and mail the attached Form.

### GUIDE to COMPLETING the JUROR CONFIRMATION FORM

- IF QUALIFIED, fill in the circle to the right of #1 below. Skip #2.
- To determine if you are **NOT QUALIFIED** to serve as a juror, read the "Reasons For Disqualification" in the enclosed Juror Instructions and Information brochure. If you are not qualified, fill in the circle under the appropriate reason number at #2A and explain at #2B. (If you claim reason 9 or 10, you must provide a doctor's letter as well as the Juror Confirmation Form.)
- If you have a **HARDSHIP**, you may request a change of court location. **PLEASE NOTE: INCONVENIENCE/DISTANCE IS NOT A HARDSHIP.** Fill in the circle to the **RIGHT** of the court to which you wish to transfer and briefly explain your hardship at "Hardship Reason" at #3. If the name of the court to which you wish to transfer is not listed, then it is not available.
- To **POSTPONE** your date of juror service for up to one year, complete #4 below.
- If you would like to request an **FM assistive listening device**, fill in the circle to the right of #5. Information for the deaf, late-deafened, and hard of hearing is available at [www.MAJury.gov](http://www.MAJury.gov).
- YOU ARE REQUIRED BY LAW TO COMPLETE #6, WHETHER OR NOT YOU SERVE**, to ensure that the jury pool reflects the diversity of all of our citizens. You must respond to **BOTH** questions #6A and #6B.
- Please date, sign, detach, and mail the Juror Confirmation Form unless you are responding online at [www.MAJury.gov](http://www.MAJury.gov).

## JUROR CONFIRMATION FORM

1. I am qualified to serve as a juror.  Badge No. 0123456789

2A. Disqualification

|                          |                          |                          |                          |                          |                          |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1                        | 2                        | 3                        | 4                        | 5                        | 6                        | 7                        | 8                        | 9                        | 10                       |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

01/08

2B. Disqualification Details

3. Hardship Transfer

|                          |                          |                          |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Hardship Reason:

4. Postponement

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Month                | Day                  | Year                 |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

5. Request FM assistive listening device

6. Demographic Information

**REQUIRED: Answer both A and B**

|   |   |
|---|---|
| A. Black/African American <input type="checkbox"/>        | White <input type="checkbox"/>                          |
| Native Hawaiian/Pacific Islander <input type="checkbox"/> | American Indian/Alaskan Native <input type="checkbox"/> |
| Asian <input type="checkbox"/>                            | Other (specify) <input type="text"/>                    |

B. Are you Hispanic/Latino? Yes  No

7. I certify under penalty of perjury that the information provided herein is true and complete to the best of my knowledge.

Date: \_\_\_\_\_ Signature of juror or person authorized to sign

**MICHIGAN**

**36**

**Statewide Juror Qualification Questionnaire**




**MINNESOTA**

37

**Statewide Jury Administration Plan**



## Appendix A: Petit jury summons



MINNESOTA  
JUDICIAL  
BRANCH

**SUMMONS**  
You are hereby notified that you have been selected to serve as a trial juror in the County District Court.

**COMPLETE and SUBMIT your Qualification Questionnaire ONLINE at:**  
<https://www.mncourts.gov/jury>

**RESPOND TO YOUR SUMMONS WITHIN 10 DAYS**  
*if internet is not available, submit the paper qualification questionnaire below by mail.*

- Please read both sides of the summons and complete the questionnaire either online or on paper, but not both.
- Information about jury service and court safety can be found at [mncourts.gov/jury](https://mncourts.gov/jury) or on the My Minnesota Juror mobile app.
- If questions remain, please contact us.

← Tear Apart Here. **SAVE** and **BRING** the upper portion when you report for jury service. **COMPLETE** questionnaire **IMMEDIATELY**. →

**Complete Questionnaire on-line or by paper. Submit within 10 days.**

Minnesota law requires you to serve on jury service if qualified. You may be guilty of a crime if you do one of the following (Minnesota Statutes Chapter 593).

- Fail to return this questionnaire
- Misrepresent information on this jury questionnaire
- Fail to show up for jury service as directed

**PLEASE FOLD FOR THE ADDRESS TO SHOW IN THE RETURN ENVELOPE**

**SECTION A — QUALIFICATION QUESTIONS**

This questionnaire is necessary to determine whether you are qualified to serve as a juror. Please check the appropriate boxes.

YES  NO 1. Are you a citizen of the United States?  
If NO, List country of citizenship \_\_\_\_\_.

YES  NO 2. Are you at least 18 years old?  
If NO, enter date of birth \_\_\_\_\_ (mm/dd/yyyy)

YES  NO 3. Are you a resident of this County?  
If NO, List county of residence \_\_\_\_\_

YES  NO 4. Are you able to speak and understand English and are others able to understand you?

YES  NO 5. Do you have a physical or mental disability that would affect your ability to serve on a jury? If YES, you must include a written explanation of the disability as well as a

# Minnesota State Jury Administration Plan

description of any requested accommodations that would allow you to serve. A medical statement may be required.

Are you requesting an accommodation, which would allow you to serve on a jury?  YES  NO

Space is provided on the back of this form to describe your disability and the accommodation(s) needed which would allow you to perform jury service.

YES  NO 6. Have you ever been convicted of a felony? If YES, are you still on parole or still under the supervision of the Court, Probation or Corrections?  YES  NO

YES  NO 7. Have you ever been on jury duty any where in Minnesota in the past four years? Please note that jury duty is not limited to actual service on a case. It is defined as a person who filled out the questionnaire, is qualified as a juror, and goes or is available to go to the courthouse to serve as a juror. IF YES, when and where?

YES  NO 8. Are you a judge in the judicial branch?

**FOR PERSONS AGE 70 OR OVER ONLY:** If you are 70 years of age or older, you may serve on jury duty OR you may be excused. Do you wish to be excused?  YES  NO If YES, enter date of birth \_\_\_\_\_ (mm/dd/yyyy)

**QUESTIONNAIRE CONTINUES ON REVERSE SIDE — PLEASE COMPLETE BOTH SIDES OF THIS FORM**

---

**HOW YOU WERE SELECTED:** Your name was randomly selected from a list of licensed drivers, state identification card holders and registered voters. You should consider yourself qualified for jury duty and expect to appear for service as described on the front side of this summons, unless you are informed in writing by this court otherwise.

**EXCUSALS AND POSTPONEMENTS:** You must complete and return the jury questionnaire. If you have previously postponed your service, you are required to review, update and RESUBMIT your new questionnaire. Employers are required by law to give employees time off for jury service, and qualified citizens are required to serve. If you must make a request for postponement because of hardship, you may do so in the postponement section below. Your qualifications to serve and any request for excusal or postponement will be reviewed by the court. You will be notified in writing if you are NOT required to report for service or if your reporting date is changed.

**JUROR PAY:** You will receive compensation for each day you report to the courthouse. You will also be reimbursed mileage for roundtrip travel to and from the courthouse from your residence. If you meet certain guidelines, you may be eligible for reimbursement of day care expenses. Information and forms regarding day care expenses reimbursement will be available when you report for jury service.

**DISCRIMINATION:** No citizen shall be excluded from jury service in this state on account of race, color, creed, religion, sex, national origin, marital status, status with regard to public assistance, disability, age, occupation, physical or sensory disability, sexual orientation, or economic status.

**ADDITIONAL INFORMATION:** You will receive information on your responsibilities as a juror the first day you report for service. Weapons are prohibited on the premises and you may be subject to search. Cell phones and other electronic devices are restricted in courtrooms. Be prepared to spend most of the day at the courthouse. For more information on jury service go to: <http://mncourts.gov/Jurors.aspx>. If any accommodations are needed in order for you to serve on jury duty, please contact the Jury Manager **BEFORE** your reporting date.

**OPTION TO RECEIVE EMAILED COMMUNICATIONS FROM THE COURT:** The court may send some communications via email. By providing your email address in the space provided in the tear off section below, you are agreeing to receive email communications from the jury office. If emails to you will be delivered on your phone, text message and data rates may apply. If you do not wish to receive email communications from the jury office, **do not enter** your email address in the space provided below. You will continue to receive all communications via standard mail.

Trial by jury is a basic American right, enshrined in both our State and Federal Constitutions. As a prospective juror, you have an opportunity to participate directly in a critical component of our democracy. Thank you for your time in returning the questionnaire and being available for jury service.

← Tear Apart Here. **SAVE** and **BRING** the upper portion when you report for jury service. **COMPLETE** questionnaire **IMMEDIATELY**. →




# Minnesota State Jury Administration Plan

| SECTION B - STATISTICAL INFORMATION  |   |   |   |
|--|---|---|---|
| This information is requested pursuant to Court rule and has no bearing on qualification for jury service.   |   |   |   |
| DATE OF BIRTH<br>/ /<br>Mo Day Yr  | RACE (Mark an X in one or more boxes to indicate what race you consider yourself.)<br><input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White<br><input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> Some Other Race | <b>A</b><br><b>N</b><br><b>D</b>  | Are you of Spanish/Hispanic/Latino Origin or Descent?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| YOUR OCCUPATION  |   | GENDER<br><input type="checkbox"/> Male <input type="checkbox"/> Female   |   |
| MARITAL STATUS<br><input type="checkbox"/> Married <input type="checkbox"/> Unmarried  |   | SPOUSE'S OCCUPATION   |   |
| EDUCATION<br><input type="checkbox"/> Less Than H.S. Diploma <input type="checkbox"/> Bachelors, Vocational or Equivalent Degree<br><input type="checkbox"/> H.S. Diploma or GED <input type="checkbox"/> Master's Advanced or Equivalent Degree |   | AGE (S) OF CHILDREN:<br>1.) _____ 2.) _____ 3.) _____ 4.) _____ 5.) _____ |   |
| PLEASE PROVIDE PHONE NUMBER(S) WHERE YOU MAY BE CONTACTED  |   |   |   |
| HOME PHONE<br>( )  | WORK PHONE<br>( )   | CELL PHONE<br>( )   |   |
| Question 5. DISABILITY AND ACCOMMODATION REQUESTS  |   |   |   |
| Describe your physical or mental disability: _____   |   |   |   |
| Describe the accommodations you are requesting which would allow you to perform jury service: _____  |   |   |   |
| _____  |   |   |   |

| PLEASE PRINT ANY CHANGE IN NAME OR MAILING ADDRESS  |                  |            |     |
|---|------------------|------------|-----|
| LAST NAME   | FIRST            | MIDDLE     |     |
| ADDRESS   | CITY             | STATE      | ZIP |
| ADD YOUR EMAIL ADDRESS HERE TO OPT IN TO RECEIVE EMAIL COMMUNICATIONS FROM THE COURT  |                  |            |     |
| EMAIL   |                  |            |     |
| POSTPONEMENTS   |                  |            |     |
| I AM REQUESTING A POSTPONEMENT FOR THE FOLLOWING REASON: _____  |                  |            |     |
| Alternative time frame within 9 months of original service date that I could serve: 1st Choice Starting: _____ 2nd Choice Starting: _____ |                  |            |     |
| WITHIN 10 DAYS, COMPLETE ON-LINE OR SIGN AND MAIL THIS COMPLETED QUESTIONNAIRE.   |                  |            |     |
| If another person assisted you in completing this form, please explain why and indicate the name of the person here.<br>_____             |                  |            |     |
| I declare under penalty of perjury that everything I have stated in this document is true and correct.                                    |                  |            |     |
| Signature _____   | Print Name _____ | Date _____ |     |

## Appendix A: Grand jury summons



**MINNESOTA  
JUDICIAL  
BRANCH**

**GRAND JURY SUMMONS**

You are hereby notified that you have been selected to serve as a Grand Juror in District Court for the time period indicated below. **In the event a grand jury is ordered to convene you will be notified when to report. Until that time you do not need to report. You are on call beginning on:**

More information about your service is on the reverse side.

**Where:**

**Length of Term:**

← Tear apart here. **SAVE** and **BRING** the upper portion when you report for jury service. **COMPLETE** questionnaire **IMMEDIATELY**. →

**Qualification Questionnaire for Grand Jury Service. Complete and return within 10 days.**

Minnesota Law requires you to serve on jury service if qualified. You may be guilty of a crime if you do one of the following (Minnesota Statute Chapter 593).

- Fail to return this jury questionnaire.
- Misrepresent information on this jury questionnaire
- Fail to show up for jury service as directed

**SECTION A – QUALIFICATION QUESTIONS**

This questionnaire is necessary to determine whether you are qualified to serve as a juror. If another person assists you in completing the questionnaire, please explain why and indicate the person's name on the back of the form. Please check the appropriate boxes.

Yes  No 1. Are you a citizen of the United States?  
If NO, list country of citizenship \_\_\_\_\_

Yes  No 2. Are you at least 18 years old?  
If NO, enter date of birth \_\_\_\_\_ (mm/dd/yyyy)

Yes  No 3. Are you a resident of this County?  
If NO, list county of residence \_\_\_\_\_

Yes  No 4. Are you able to speak and understand English **and** are others able to understand you?

Yes  No 5. Do you have a physical or mental disability that would affect your ability to serve on a jury? If YES, you must attach a written explanation of the disability, as well as a description of any requested accommodations that would allow you to serve. A medical statement may be required.  
Are you requesting an accommodation, which would allow you to serve on a jury?  Yes  No  
Space is provided on the back of this form to describe your disability and the accommodation(s) needed, which will allow you to perform jury service.

Yes  No 6. Have you ever been convicted of a felony? If YES, are you still on parole or still under the supervision of the Court, Probation, or Corrections?  Yes  No

Yes  No 7. Have you been on jury duty anywhere in Minnesota in the past four years? Please note that jury duty is not limited to actual service on a case. It is defined as a person who filled out the questionnaire, is qualified as a juror, and goes or is available to go to the courthouse to serve as a juror. If YES, when and where?  
\_\_\_\_\_

Yes  No 8. Are you a judge in the judicial branch?

**GRAND JURY**

**Where:**

**FOR PERSONS AGE 70 OR OVER ONLY:** If you are 70 years of age or older, you may serve on jury duty OR you may be excused. Do you wish to be excused?  Yes  No If YES, enter date of birth \_\_\_\_\_ (mm/dd/yyyy)

**QUESTIONNAIRE CONTINUES ON REVERSE SIDE – PLEASE COMPLETE BOTH SIDES OF THIS FORM.**





**MISSISSIPPI**

**38**

**Harrison County – Juror Information Card**



# Sample

## HARRISON COUNTY

# Sample

### JUROR INFORMATION CARD

PLEASE PRINT

JUROR NO. \_\_\_\_\_

VOTER NO. \_\_\_\_\_

|  |                                 |  |  |  |
|--|---------------------------------|--|--|--|
| NAME (LAST, FIRST, MIDDLE INITIAL)   |                                 | PHONE NO.  | BUSINESS PHONE   | AGE  |
| HOME ADDRESS   | CITY                            | ZIP CODE   | WHAT IS YOUR OCCUPATION?   | IF RETIRED, WHAT WAS YOUR FORMER OCCUPATION? |
| MAILING ADDRESS  | CITY                            | ZIP CODE   | HUSBAND/WIFE NAME:   | NO. OF CHILDREN                              |
| YOUR EMPLOYER  |                                 | HOW LONG HAVE YOU WORKED THERE?  |  |  |
| PLACE OF BIRTH   |                                 | DOES YOUR HUSBAND/WIFE WORK?<br>( ) YES ( ) NO   | WHAT IS HIS/HER OCCUPATION?  |  |
| HOW LONG HAVE YOU LIVED IN HARRISON COUNTY?  | YOUR HUSBAND'S/WIFE'S EMPLOYER? |  | HOW LONG HAS HE/SHE WORKED THERE?  |  |
| LEVEL OF EDUCATION COMPLETED:<br>( ) ELEMENTARY ( ) JUNIOR HIGH ( ) HIGH SCHOOL<br>( ) COLLEGE ( ) GRADUATE SCHOOL |                                 | HAVE YOU EVER SERVED ON A CIVIL JURY?<br>( ) YES ( ) NO                                      | HAVE YOU EVER SERVED ON A CRIMINAL JURY?<br>( ) YES ( ) NO                             |  |
| THE NUMBER OF MILES YOU LIVE FROM THE COURTHOUSE.<br>_____ MILES ONE WAY.  |                                 | HAVE YOU EVER BEEN AN ACCUSED,<br>PLAINTIFF OR WITNESS IN A CRIMINAL CASE.<br>( ) YES ( ) NO | RELIGIOUS PREFERENCE:  |  |
| DO YOU NEED A CERTIFICATE SHOWING THE NUMBER OF DAYS YOU SERVED ON JURY?<br>( ) YES ( ) NO                         |                                 | HAVE YOU EVER BEEN A DEFENDANT,<br>PLAINTIFF OR WITNESS IN A CIVIL CASE?<br>( ) YES ( ) NO   | I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS<br>TRUE AND CORRECT:<br>SIGNATURE _____ |  |

**39**

**Lowndes County – Juror Questionnaire**



**40**

**Monroe County – Juror Questionnaire**

## MONROE COUNTY CIRCUIT COURT FOR OFFICIAL USE ONLY – PLEASE PRINT

|   |  |   |                                       |   |            |
|---|--|---|---------------------------------------|---|------------|
| <b>JURORS NAME – please print</b><br>(Last) (First) (Middle) (Maiden)   |  |   |                                       | <b>Race</b>   | <b>Sex</b> |
| <b>Home Address</b>   |  |   |                                       | <b>City</b>   | <b>Zip</b> |
| <b>Mailing Address – if different than Home Address</b>   |  |   |                                       | <b>City</b>   | <b>Zip</b> |
| <b>Employer</b>   | <b>Occupation (previous occupation if retired)</b> | <b>How long employed</b>  | <b>Retired</b><br>Yes ____<br>No ____ |   |            |
| <b>Married__ Single__ Divorced__ Separated__ Widowed__</b>  |  |   | <b>Number of children</b>             |   |            |
| <b>Spouse's Name</b>  | <b>Spouse's Employer</b>                           | <b>Spouse's occupation or previous occupation, if retired</b>   |                                       |   |            |
| <b>How long has spouse been employed by this company?</b>   |  | <b>If spouse is retired, how long has he or she been retired?</b>   |                                       |   |            |
| <b>How long have you lived in Monroe County</b>   |  | <b>Level of Education Completed:</b><br>Elementary____ Junior High____ High School____<br>Some college____ College graduate____ Graduate School____ |                                       |   |            |
| <b>Have you ever served on a Jury? Yes__ No__ If yes, what type of jury? Criminal__ Civil__ Grand__</b>   |  |   |                                       |   |            |
| <b>Have you ever been accused, complainant or witness in a criminal case? Yes__ No__</b><br><b>Have you ever been a defendant, plaintiff or witness in a civil case? Yes__ No__</b> |  |   |                                       | <b>If you live outside city limits of Aberdeen, how many miles (one way) from the courthouse?</b> |            |

|                                   |                     |                     |   |                      |                          |
|-----------------------------------|---------------------|---------------------|---|----------------------|--------------------------|
| <b>JURORS NAME – PLEASE PRINT</b> |                     |                     | <b>Age</b>                                | <b>Date of Birth</b> | <b>Social Security #</b> |
| <b>Home Phone #</b>               | <b>Cell Phone #</b> | <b>Work Phone #</b> | <b>If no phone, please list contact #</b> |                      |                          |

**I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.**

**SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_**

**MISSOURI**



**41**

**Statewide Jury Summons with Juror  
Qualification Form**

**DO NOT MAIL OR RETURN THIS SECTION.  
BRING THIS SECTION WITH YOU WHEN YOU REPORT.**

|                         |                 |
|-------------------------|-----------------|
| DATE AND TIME TO REPORT | REPORT TO       |
| WHERE TO REPORT         | TERM OF SERVICE |



**SUMMONS FOR JURY SERVICE**

By order of the Presiding Judge of the Circuit Court of XXX County, Missouri, you are hereby summoned to serve as a juror as indicated above. **IF YOU FAIL TO APPEAR AS DIRECTED BY THIS SUMMONS YOU MAY BE HELD IN CONTEMPT OF COURT AND FINED AS PROVIDED BY SECTION 494.450, RSMo.** Please bring this summons with you when you report for jury service. Do not return this section by mail. If you need an accommodation for disability, please call (XXX) XXX-XXXX at least one week in advance of your report date. You may also use this number in case of an emergency while you are serving. Access to jury service is available to all individuals with a disability as required by the Americans with Disabilities Act of 1990.

**PLEASE READ IMPORTANT INFORMATION ON BACK OF FORM**

**JUROR QUALIFICATION FORM**  
 DETACH HERE **COMPLETE, SIGN AND RETURN THIS BOTTOM SECTION WITHIN 10 DAYS** DETACH HERE

NOTE: Please Print

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Age \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Email \_\_\_\_\_ Text \_\_\_\_\_ (Cell Phone Carrier (e.g., AT&T) required) \_\_\_\_\_

Preferred method of receiving notifications:  Email  Text  Both

Mileage from your home to the XXX County Courthouse in XXX City (round trip) \_\_\_\_\_

- |  |   |
|--|---|
| 1. Are you a United States citizen?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | 5. Are you on active duty in the armed forces or a member of the Missouri Militia on active duty under order of the Governor?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 2. Do you live in XXX County?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | 6. Are you a judge of a court of record? Please indicate which court _____<br><input type="checkbox"/> Yes <input type="checkbox"/> No  |
| 3. Do you read, speak and understand English?<br>If no, is your inability to read, speak and understand English due to a vision or hearing impairment?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 7. Do you have a physical or mental disability that would interfere with or prevent you from serving as a juror? If yes, doctor's letter must be provided. If yes, please explain _____<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Have you been convicted of a felony and not had your civil rights restored? If yes, when? _____ Where? _____<br><input type="checkbox"/> Yes <input type="checkbox"/> No  |   |

8. Have you served on a Grand Jury before?  Yes  No When: \_\_\_\_\_

**Biographical Information**

9. Employment Status:  Employed  Self-Employed  Retired  Unemployed  Disabled  
 Current/last employer or company and occupation: \_\_\_\_\_  
 Number of years with current/last employer: \_\_\_\_\_
10. Marital Status:  Single  Married  Widowed  Separated  Divorced
11. Spouse's employer and occupation: \_\_\_\_\_
12. Are you a member of the Missouri General Assembly?  Yes  No
13. Race:  American Indian  Latino  Asian  Native Hawaiian  Black/African American  White  Other
14. Gender:  Male  Female
15. Do you have children under the age of 18?  Yes  No
16. Indicate your highest grade level completed:  
 Grade School  College  
 High School  Post Graduate  
 Technical/Trade  No Formal Education

17. Are you related to a law enforcement officer?  Yes  No
18. Have you been convicted of a crime other than a traffic ticket?  Yes  No
19. Have you served as a juror before?  Yes  No  
 Type of case?  Criminal  Civil  
 When? \_\_\_\_\_  
 What county? \_\_\_\_\_  
 Were you a foreperson on a Jury Trial?  Yes  No
20. Have you ever been a party in a lawsuit (as a plaintiff or defendant, not merely as a witness)?  Yes  No
21. Have you ever made a claim or had a claim made against you to obtain or recover money, either for physical injuries or for damage to property?  Yes  No

**I swear/affirm under penalty of perjury that these facts are true according to my knowledge and belief.**

X \_\_\_\_\_  
 Juror's Signature

\_\_\_\_\_  
 Date

# JURY INFORMATION

*(Optional for courts depending on specifics of Courthouse; recorded message, directions, etc.)*

Visit [www.mocourts.org](http://www.mocourts.org) for further general jury information.

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PLACE  
STAMP  
HERE

CIRCUIT CLERK  
COURT NAME  
COURT ADDRESS  
COURT CITY STATE ZIP

FOLD

Postal Regulations Require that this Document be Sealed.  
Tape only where indicated.  
DO NOT STAPLE

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HERE

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**42**

**City of St. Louis – Juror Qualification  
Questionnaire**



**MONTANA**

**43**

**Missoula County – Juror Qualification  
Questionnaire**



PLEASE FILL OUT AND RETURN THE FOLLOWING WITHIN SEVEN (7) DAYS TO



CLERK OF DISTRICT COURT  
200 WEST BROADWAY, MISSOULA MONTANA 59802  
PHONE: (406) 258-4780, EMAIL: [dcjury@missoulacounty.us](mailto:dcjury@missoulacounty.us)

**QUESTIONNAIRE AS TO QUALIFICATION FOR JURY SERVICE**  
(PLEASE PRINT OR TYPE)

1. Name: \_\_\_\_\_ Juror Number: \_\_\_\_\_
2. Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_
3. Please state the round trip mileage from your home to the courthouse \_\_\_\_\_
4. Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cellular \_\_\_\_\_ Email \_\_\_\_\_
5. How long have you resided there? \_\_\_\_\_ Number of years in Montana? \_\_\_\_\_
6. Married [ ] Single [ ] Age \_\_\_\_\_ Sex: Male [ ] Female [ ]
7. Do you have children? Yes [ ] No [ ] Ages \_\_\_\_\_ Sex \_\_\_\_\_
8. What education have you had? \_\_\_\_\_
9. Are you employed at present? Yes [ ] No [ ] Occupation \_\_\_\_\_
10. Employer's name \_\_\_\_\_ Employer's Address \_\_\_\_\_
11. a. If you are married, name of spouse \_\_\_\_\_  
b. If married, occupation of spouse \_\_\_\_\_  
c. If retired, or not working, give last occupation \_\_\_\_\_  
d. If married, give spouse's employer \_\_\_\_\_
12. Have you ever served as a juror? Yes [ ] No [ ] If so, in what court? \_\_\_\_\_
13. Have you or any member of your immediate family ever been injured in an accident? Yes [ ] No [ ]  
If so, what type? \_\_\_\_\_
14. Are you or any member of your immediate family involved in law enforcement in any official capacity? Yes [ ] No [ ]  
If so, briefly explain \_\_\_\_\_
15. Have you or any member of your immediate family ever been a plaintiff or defendant in a lawsuit? Yes [ ] No [ ]  
What type of lawsuit? \_\_\_\_\_
16. Are you or your spouse related to an attorney? Yes [ ] No [ ] If so, his/her name and address \_\_\_\_\_  
\_\_\_\_\_
17. Are you or your spouse presently being represented by an attorney? Yes [ ] No [ ] If so, his/her name and address \_\_\_\_\_  
\_\_\_\_\_
18. Do you have any disability which you feel would make it difficult to serve on a jury? Yes [ ] No [ ] If so, briefly  
explain the disability and the accommodations we need to provide to enable you to serve on a jury. \_\_\_\_\_  
\_\_\_\_\_
19. In order to be eligible to serve as a trial juror, you must be 18 years of age or older, a resident for at least 30 days of the state and of the city, town or county in which you are called for jury duty, a citizen of the United States and not convicted of malfeasance in office or any felony or other high crime, the sentence of which has not yet expired or the fine not yet paid.
20. Do you feel you should be excused from serving as a juror because of undue hardship or because you do not meet the eligibility requirements for jury service? Yes [ ] No [ ] If you answered "yes", please complete the Affidavit For Excusal and return to the address above.

I certify that the foregoing statements are true to the best of my knowledge and belief.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**(Sign this form by typing your name on the signature line above)**

**44**

**Ravalli County – Juror Qualification  
Questionnaire**



PLEASE FILL OUT AND RETURN IMMEDIATELY TO:  
Clerk of District Court, 205 Bedford, Suite D, Hamilton, Montana 59840  
Alternatively, email to [courtfilings@rc.mt.gov](mailto:courtfilings@rc.mt.gov)

**QUESTIONNAIRE AS TO QUALIFICATION FOR JURY SERVICE**  
(Please Print or Type)

1. Name \_\_\_\_\_
2. Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Physical Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_
3. If you live outside Hamilton city limits, state the **round trip mileage** from your home to Hamilton. \_\_\_\_\_
4. Telephone: Home Number \_\_\_\_\_ Cell Number \_\_\_\_\_
5. How long have you resided there: \_\_\_\_\_ Years in State? \_\_\_\_\_
6. Married \_\_\_\_\_ Single \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_
7. Do you have children? \_\_\_\_\_ Ages \_\_\_\_\_ Gender \_\_\_\_\_
8. What education have you had? \_\_\_\_\_
9. Are you employed at present? \_\_\_\_\_ Occupation \_\_\_\_\_
10. Employer's name \_\_\_\_\_ Address \_\_\_\_\_
11. If retired, or not working, give last occupation \_\_\_\_\_  
If you are married, name of spouse \_\_\_\_\_  
If married, occupation of spouse \_\_\_\_\_  
If married, give spouse's employer \_\_\_\_\_
12. Have you ever served as a juror? \_\_\_\_\_ If so, in what court? \_\_\_\_\_
13. Have you or any member of your immediate family ever been injured in an accident? \_\_\_\_\_  
If so, what type? \_\_\_\_\_
14. Are you, or any member of your immediate family involved in law enforcement in any official capacity? \_\_\_\_\_  
If so, briefly explain \_\_\_\_\_
15. Have you or any member of your immediate family ever been a plaintiff or defendant in a lawsuit? \_\_\_\_\_  
What type of suit? \_\_\_\_\_
16. Are you or your spouse related to any attorney? \_\_\_\_\_  
If so, his or her name and address \_\_\_\_\_
17. Are you or your spouse presently being represented by an attorney? \_\_\_\_\_  
If so, his or her name and address \_\_\_\_\_
18. Do you have any disability, which you feel would make it difficult to serve on a jury? \_\_\_\_\_
19. Have you ever been convicted of malfeasance in office or any felony other high crime? \_\_\_\_\_
- \*20. Do you feel you should be excused from serving as a juror? \_\_\_\_\_

\*If you answered "no" to #20, complete the CONFIRMATION OF APPEARANCE on the opposite side. If you answered "yes" to #20, you may complete the AFFIDAVIT FOR EXCUSE on the opposite side, have your signature notarized, and return immediately to the Clerk of the District Court.

*I declare under penalty of perjury and the laws of the state of Montana that all statements are true and correct.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Complete only *Section 1* or *Section 2* - Do not fill out both sections of this form.**  
(Complete the Questionnaire on the reverse side)

**SECTION 1. CONFIRMATION OF APPEARANCE FOR JURY SERVICE**  
(Please complete and return immediately)

Department No. \_\_\_\_\_  
**Trial Date:** \_\_\_\_\_

I hereby acknowledge that I have received a Summons for Jury Service and WILL APPEAR in Ravalli County District Court on the date stated.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature \_\_\_\_\_ Phone No: \_\_\_\_\_

**SECTION 2. AFFIDAVIT FOR EXCUSE FROM JURY SERVICE**  
(Complete and return immediately)

STATE OF MONTANA )  
County of Ravalli )

(Print Name) \_\_\_\_\_ being first duly sworn, deposes and says, *I request to be excused from jury duty because I do not meet the eligibility requirements to serve as a juror or because of undue hardship for the following reason(s):*

TEMPORARY EXEMPTION – (please state reason and dates below) \_\_\_\_\_

**You will receive notification ONLY in the event that your exemption request is DENIED.**

CHANGE OF RESIDENCE outside Ravalli County (New Address: \_\_\_\_\_)

PERMANENT MEDICAL EXEMPTION - **MUST be submitted with a physician's certification**, which states you are **chronically incapacitated by illness or injury, and that you are "Permanently" excused from all future jury service.** (If approved, you will be excused from jury service for the remainder of the current year, and ALL years thereafter.)

*I declare under penalty of perjury and the laws of the state of Montana that all statements are true and correct.*

DATED this \_\_\_ day of \_\_\_\_\_ 20\_\_ **Signature** \_\_\_\_\_  
Phone No. \_\_\_\_\_

-----  
\_\_\_\_\_**APPROVED**\_\_\_\_\_ **NOT APPROVED** \_\_\_\_\_ **TEMPORARY** \_\_\_\_\_ **PERMANENT** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

\_\_\_\_\_  
**DISTRICT COURT JUDGE** **DATE:** \_\_\_\_\_

\_\_\_\_\_  
**PAIGE TRAUTWEIN, CLERK OF COURT** **DATE:** \_\_\_\_\_

**NEBRASKA**

**45**

**Statewide Juror Qualification Form**





**Part II JUROR REQUIREMENTS.**

- YES NO 6. Are you a citizen of the United States?  
If "NO," what is your country of citizenship? \_\_\_\_\_
- YES NO 7. Do you reside in this county?  
If "NO," in which county do you reside? \_\_\_\_\_
- YES NO 8. Can you read, speak, and understand the English language?  
If "NO," what is your primary language? \_\_\_\_\_
- YES NO 9. Are you 19 years or older?

**Part III JUROR DISQUALIFICATION.**

- YES NO 10. Are you a judge of any court, clerk or deputy clerk of the Supreme Court or District Court?
- YES NO 11. Are you a sheriff or jailer?
- YES NO 12. Are you or your spouse currently a party to a suit with a pending jury trial in any court of this county?  
If "YES," give title of case and case number. \_\_\_\_\_
- YES NO 13. Have you ever been convicted of a felony?  
If "YES," in which state? \_\_\_\_\_  
If "YES," in which county? \_\_\_\_\_  
If "YES," in which year? \_\_\_\_\_  
(Does not apply if conviction was set aside or pardon issued.)

**Part IV JUROR INFORMATION.**

- 14. Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female
- 15. Date of Birth \_\_\_\_\_
- 16. Who is your employer? \_\_\_\_\_ Occupation? \_\_\_\_\_  
Employer's telephone number: \_\_\_\_\_
- 17. Name of spouse (if applicable)? \_\_\_\_\_
- 18. Is your spouse also being summoned for jury duty at this time? \_\_\_\_\_ Yes \_\_\_\_\_ No
- 19. Spouse's employer? \_\_\_\_\_ Spouse's Occupation? \_\_\_\_\_  
Telephone number of spouse's employer: \_\_\_\_\_
- 20. Are there any special accommodations you require to serve as a juror? If so, please describe:  
\_\_\_\_\_  
\_\_\_\_\_

**Part V JUROR REQUEST FOR POSTPONEMENT.** You will be notified by mail if the Court decides to grant your request.

- \_\_\_\_\_ 21. I am a full-time student and wish to be excused from serving on a jury at this time.  
Name of School \_\_\_\_\_  
(This option requires written confirmation from the Registrar's Office indicating full-time status.)

**Part VI CERTIFICATION.** I, the undersigned, certify under penalty of perjury that the answers to the above questions regarding my qualifications to serve as a juror are true and correct to the best of my knowledge and belief.

\_\_\_\_\_ **SIGN**  \_\_\_\_\_  
Date **HERE** Signature

If completed by other than summoned person, explain: \_\_\_\_\_  
\_\_\_\_\_

**Part VII**

**CONFIDENTIAL JUROR INFORMATION.** (This information is requested to assist in ensuring that all people are represented on juries. Nothing disclosed will affect your selection for jury service. The information in this section will not be shared with the parties or attorneys to any case and may only be reviewed for research purposes as authorized by the Nebraska Supreme Court.)

1. How do you classify your race? (select one or more)
  - Black/African American
  - Asian
  - American Indian/Alaska Native
  - Native Hawaiian/Pacific Islander
  - White
  - Other (specify) \_\_\_\_\_
2. How do you classify your ethnicity? (select one)
  - Hispanic or Latino       Not Hispanic or Latino
3. Sex:  Male       Female
4. Date of Birth \_\_\_\_\_

I, the undersigned, certify that the answers to the above questions are true and correct to the best of my knowledge and belief.

\_\_\_\_\_      **SIGN**      \_\_\_\_\_  
 Date      **HERE**      Signature

\_\_\_\_\_

Print Name

If completed by other than summoned person, explain: \_\_\_\_\_  
\_\_\_\_\_

**For Clerks Use Only:**

- YES    NO
1. Individual eligible for jury duty.
  2. Reason for ineligibility or for not serving (check all that apply)
    - A. Request not to serve:
      - Over 70       Prior jury service
      - Physical or mental impairment       Nursing mother
      - Active Military Duty
    - B. Person did not meet requirements:
      - Not a U.S. Citizen. Country of origin: \_\_\_\_\_
      - Does not read, speak, or understand the English language. Primary language: \_\_\_\_\_
      - Does not reside in the county
      - Was not 19 years or older
    - C. Person was disqualified:
      - Is a judge, clerk or deputy clerk       Individual or spouse is party to a pending case
      - Is a sheriff or jailer       Felony offense
    - D. Granted a postponement:
      - Full-time student
    - E. Excused by Judge for other reason (please specify if known): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- YES    NO    3. Supplemental Questionnaire used.

# NEVADA

**46**

**Churchill County – Juror Questionnaire**

[Welcome](#)[Login](#)[FAQ \(main.asp?](#)[Help](#)[\(main.asp?](#)[\(login.asp\)](#)[id=faq\)](#)[\(main.asp?](#)[id=index\)](#)[id=help\)](#)[Juror Handbook \(custom/JUROR\\_HANDBOOK.pdf\)](#)

## JUROR QUESTIONNAIRE

PLEASE CONFIRM YOUR ANSWERS TO EACH QUESTION. IF ALL ANSWERS ARE TRUE AND CORRECT TO THE BEST OF YOUR KNOWLEDGE AND BELIEF, CLICK THE SUBMIT BUTTON TO COMPLETE ENTRY OF YOUR QUESTIONNAIRE. IF YOU NEED TO MAKE ANY CHANGES TO YOUR RESPONSES, PLEASE CLICK THE BUTTON BELOW TO RETURN TO QUESTIONNAIRE ENTRY.

### SECTION A QUALIFICATIONS

1. ARE YOU A CURRENT RESIDENT OF CHURCHILL COUNTY, NEVADA?

LENGTH OF RESIDENCE IN CHURCHILL COUNTY?

LENGTH OF RESIDENCE IN NEVADA?

DO YOU LIVE WITHIN THE CITY LIMITS OF FALLON?

---

2. ARE YOU A CITIZEN OF THE UNITED STATES?

---

3. CAN YOU READ AND WRITE AND UNDERSTAND ENGLISH?

---

4. ARE YOU OVER THE AGE OF 70?

IF YES, DO YOU REQUEST AN EXEMPTION FROM JURY SERVICE?

---

**5. ARE YOU OVER THE AGE OF 65 AND LIVE 65 OR MORE MILES FROM THE COURT?**

**IF YES, DO YOU REQUEST AN EXEMPTION FROM JURY SERVICE?**

---

**6. HAVE YOU EVER BEEN CONVICTED OF A FELONY OR TREASON IN ANY STATE OR FEDERAL COURT?**

**IF YES, PLEASE GIVE THE FOLLOWING:**

**WHEN?**

**WHERE?**

**IF YOU HAVE EVER BEEN CONVICTED OF A FELONY OR TREASON IN ANY STATE OR FEDERAL COURT, HAVE YOUR CIVIL RIGHTS BEEN RESTORED?**

---

**7. SHOW THE EXTENT OF YOUR EDUCATION BY GIVING THE NUMBER OF YEARS COMPLETED:**

**Grammar and Secondary School:**

**College:**

---

**8. ARE YOU A FEDERAL OR STATE OFFICER, A JUDGE, JUSTICE OF THE PEACE, OR ATTORNEY AT LAW?**

**IF YES, PLEASE INDICATE YOUR POSITION:**

**DO YOU REQUEST A ONE YEAR EXEMPTION FROM JURY DUTY?**

---

**9. ARE YOU A LAW ENFORCEMENT/CORRECTIONAL OFFICER?**

**IF YES, PLEASE INDICATE YOUR POSITION:**

**DO YOU REQUEST A ONE YEAR EXEMPTION FROM JURY DUTY?**

---

**10. ARE YOU ACTIVE MILITARY?**

---

**11. HAVE YOU EVER SERVED IN THE UNITED STATES ARMED FORCES?**

**IF YES, WHAT BRANCH OF SERVICE?**

---

**12. WHAT IS YOUR PROFESSION OR OCCUPATION?**

---

**13. BY WHOM ARE YOU EMPLOYED?**

---

**14. DO YOU OWN AND OPERATE YOUR OWN BUSINESS?**

**IF YES, HOW MANY DO YOU EMPLOY:**

**WOULD SERVING ON A JURY AFFECT YOUR BUSINESS?**

**IF YES, PLEASE EXPLAIN:**

---

**15. DO YOU HAVE SMALL CHILDREN OR OTHER DEPENDANTS LIVING IN YOUR HOME?**

**IF YES, DO THEY REQUIRE YOUR CONSTANT CARE?**

**IF YES, PLEASE EXPLAIN:**

---

**16. PLEASE SELECT YOUR MARITAL STATUS:**



---

**17. DO YOU HAVE ANY PHYSICAL (HEARING, SIGHT, BACK, ETC.) OR MENTAL CONDITION THAT WOULD PREVENT YOU FROM SERVING?**

**IF YES, PLEASE STATE CONDITION:**

---

**18. HAVE YOU EVER SERVED AS A JUROR IN A CIVIL CASE?**

**IF YES, PLEASE LIST THE YEAR AND PLACE:**

---

**19. HAVE YOU EVER SERVED AS A JUROR IN A CRIMINAL CASE?**

**IF YES, PLEASE LIST THE YEAR AND PLACE:**

---

**20. HAVE YOU EVER SERVED AS A JUROR ON A GRAND JURY?**

**IF YES, PLEASE LIST THE YEAR AND PLACE:**

---

**21. HAVE YOU EVER SERVED AS A JUROR ON A MILITARY JURY?**

**IF YES, PLEASE LIST THE YEAR AND PLACE:**

---

**22. HAVE YOU OR YOUR IMMEDIATE FAMILY BEEN A PARTY TO A CIVIL SUIT?**

**IF YES, PLEASE STATE NATURE OF SUIT:**

---

**23. DO YOU KNOW ANY REASON WHY YOU COULD NOT SERVE AS A FAIR AND IMPARTIAL JUROR IN A CRIMINAL OR CIVIL CASE?**

**IF YES, PLEASE EXPLAIN FULLY:**

**24. ARE YOU A STUDENT? (IF YES, YOU MUST MAIL PROOF OF YOUR STUDENT ENROLLMENT TO THE JURY ADMINISTRATION)**

**25. PLEASE LIST ANY PRE-PLANNED/TICKETED BUSINESS TRIPS AND VACATIONS:**

**SECTION B  
CONFIDENTIAL**

**REMARKS:**

**RACE:**

**ETHNICITY:**

**Home Phone Number:**

**Cell Phone Number:**

(If Cell Phone Number is provided Churchill County can send a text message regarding status of trial)

**Email:**

Email will be used **ONLY** for notification of status of jurors need to appear.

[Back to Questionnaire Entry](#)

[Submit Questionnaire](#)

**NEW HAMPSHIRE**

47

## **Juror Questionnaire**

## Questionnaire

 Submit


Questions with required answers are marked with \*

1. Please provide your cell phone number. This information will be used by the Court to contact you via text messaging regarding your jury service and any changes to reporting dates and times (no spaces, ex. 6032078888). If you do not have a cell phone please leave this field blank. Standard Msg. & Data rates apply.

2. Please provide a home telephone number that the Court can use to contact you regarding your jury service (no spaces, ex. 6032078888). If you are selected to serve on a case, the attorneys in the case may contact you by telephone thirty days after the completion of your service.

3. Please provide your e-mail address \* IMPORTANT \* This is how the Court will contact you regarding jury service and any changes to reporting dates and times. Please type accurately. To ensure delivery please add jurycenterdonotreply@courts.state.nh.us to your address book.

4. Please indicate your gender

Select from list 


5. Please provide your date of birth

Month  Day  Year 

6. List all other names you have used or been known by

7. Please provide your full home address (including town or city)

8. How long have you lived at your current address?

Select from list 

9. I am a U.S. Citizen

Yes  No

10. I reside in the county that I have been summoned to serve as a juror in

Yes

No

11. Click yes if you have served as a juror in a New Hampshire Superior Court within the last 3 years

Yes

No

12. If you answered yes to question 11, please provide the court location and date you served

13. Click yes if you are 70 years of age or older and DO NOT wish to serve as a juror

Yes

No

14. I am able to read, speak and understand the English language

Yes

No

15. Please indicate the state or country where you were born

16. I have been convicted of a felony that has not been annulled

Yes

No

17. If you answered yes to question 16 please indicate the State, conviction date and charge

18. What is the highest level of education that you have completed?

Select from list



19. Current work and/or school status

Select from list



20. Please list YOUR present or last job

21. Please indicate the name and address of your employer (list past if not now working)

22. Please indicate how many years you have been employed by your current employer

Select from list



23. Are you a government employee of the State of New Hampshire?

Yes

No

24. Marital Status

Select from list



25. Please provide the names and ages of your children (if any)

26. Have you ever served in the military?

Yes

No

27. If yes, please state what branch

Select from list



28. Please provide your spouse or partner's name

29. What is the highest level of education that your spouse or partner has completed?

Select from list





30. What is your spouse or partner's current work and/or school status?

Select from list



31. Please list your spouse or partner's present or last job

32. Please provide the name and address of your spouse or partner's employer (list past if not now working)

33. How long has your spouse or partner been with their employer?

Select from list



34. Have you or any member of your family ever been involved in any criminal or civil case in any court?

Yes

No

35. What was your or their involvement?

Select from list



36. Have you or a close friend or relative ever been a member of any local, state or federal law enforcement agency?

Yes

No

37. If yes, which agency?

Select from list



38. When was this service?

Select from list



39. Relationship of person

Select from list



40. Have you or has any member of your family been the victim of any crime?

Yes

No

41. If yes, when did this occur?

Select from list



42. What was the crime?

Select from list



43. Who was the victim?

Select from list



44. I have a physical or mental disability or other medical condition that may prevent me from serving as a juror

Yes

No

45. If you answered yes to question 44 and you WOULD LIKE TO SERVE AS A JUROR, please provide details of your mental or physical disability

46. If you answered yes to question 44 and DO NOT WANT TO SERVE AS A JUROR, please provide details of your mental or physical disability

47. If you are completing this questionnaire on behalf of the juror, please provide your name, relationship to the juror and the reason why you are completing the questionnaire

48. Did you serve a portion of your jury service on an earlier date and are now completing your term?

Yes

No

49. By typing my name below and clicking submit, I certify that the above responses are true to the best of my knowledge and I understand that a willful misrepresentation of a material fact may be punishable as a misdemeanor under state law.

**NEW JERSEY**

**48**

**Order and Pilot Program  
Questionnaire**

## NOTICE TO THE BAR

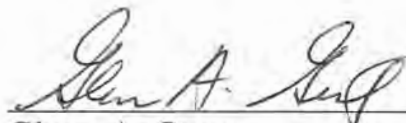
### JURY REFORMS – EXPANDED AVAILABILITY OF AGGREGATE (NOT INDIVIDUAL) JUROR DEMOGRAPHIC INFORMATION

In furtherance of its direction in State v. Dancil, 248 N.J. 114, 146 (2021), the Supreme Court previously approved enhancements to the jury questionnaire to ask each summoned juror to voluntarily provide the juror's demographic information as to race, ethnicity, and gender. As announced in a July 14, 2022 [notice](#), the Judiciary began collecting such information, and providing aggregate reports upon request, for cases that opted into the Attorney-Conducted Voir Dire (ACVD) pilot program.

All counties will have demographic information available for jurors reporting on or after June 1, 2023. As juror demographic information becomes available in a particular county, court staff will provide that aggregate information if requested by an attorney in any jury trial (civil and criminal, judge-led voir dire and ACVD) as part of the Rule 1:8-5 petit jury list.

Additional information on ongoing jury reforms is available on the Judiciary website at <https://www.njcourts.gov/attorneys/jury-reforms>.

Questions regarding this notice should be directed to the Administrative Office of the Courts Jury Management Section at (609) 815-2900 extension 58133.

  
\_\_\_\_\_  
Glenn A. Grant  
Administrative Director of the Courts

Dated: March 28, 2023

## NOTICE TO THE BAR AND PUBLIC

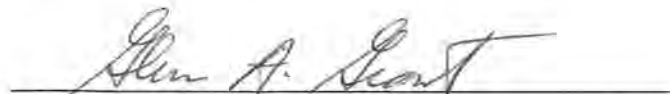
### COLLECTION OF VOLUNTARY JUROR DEMOGRAPHIC INFORMATION -- INITIAL IMPLEMENTATION IN BERGEN, CAMDEN, AND MIDDLESEX COUNTIES

The Supreme Court in State v. Dangcil, 248 N.J. 114, 146 (2021), directed the collection of voluntary juror demographic information as to race, ethnicity, and gender. The Court as part of its [July 12, 2022](#) Administrative Determinations on the Report of the Committee of the Judicial Conference on Jury Selection, approved the Committee's recommendations as to how those demographic questions should be worded. The Court also approved updates to the juror qualification questionnaire in order to begin collecting that demographic information, starting for all trials in Bergen, Camden, and Middlesex Counties, as part of the pilot program on attorney-conducted voir dire. The collection of juror demographic information will expand statewide sometime in 2023.

The attached enhanced juror qualification questionnaire, which includes those demographic questions, will be used in Bergen, Camden, and Middlesex. Those same questions have been added to the online juror qualification portal (eResponse).

The collection of voluntary juror demographic information will help the Judiciary understand the diversity and representativeness of jury pools. Juror responses to demographic questions are optional and will not affect juror selection.

Questions on this notice should be directed to Statewide Manager of Jury Programs Brian J. McLaughlin at (609) 815-2900 x58133.



Glenn A. Grant

Administrative Director of the Courts

Dated: July 14, 2022



Sample

Camden County Jury Mgmt  
101 South Fifth Street Suite L-10  
Camden, NJ 08103



John Doe  
123 Main Street  
Camden, NJ 08103



Candidate ID: 0004051953  
Juror No: 00010

**Respond online at [njcourts.gov/myjuryservice](http://njcourts.gov/myjuryservice)  
Questions? Go to [njcourts.gov/jurors/index.html](http://njcourts.gov/jurors/index.html)**

## **Petit Juror Questionnaire**

**By Order of the Court, Deborah Silverman Katz, Assignment Judge, you are summoned to serve as a petit juror beginning on September 12, 2022.**

**Your Term of Service is 4 days or 1 trial.** This required questionnaire can also be completed by using the online eResponse system at [njcourts.gov/myjuryservice](http://njcourts.gov/myjuryservice).

If qualified to serve, check for reporting instructions after 5:30 p.m. the night before you are to report by calling (856) 650 - 9090 or going to: [njcourts.gov/jurors/juryreporting](http://njcourts.gov/jurors/juryreporting)

If you are required to report in-person, you will report to:

Camden County Hall of Justice,  
101 South Fifth St. Suite L-10,  
Camden, NJ 08103.

You may contact Jury Management at 856-650-9085 or [camjury.mbx@njcourts.gov](mailto:camjury.mbx@njcourts.gov)

**The Judiciary will, with advance notice, provide accommodations consistent with the Americans with Disabilities Act.**

### **Mandatory Name and Signature**

I hereby certify that the answers on this form are true and correct. I understand that if I submit a knowingly false answer I can be subject to punishment for contempt of court.

\_\_\_\_\_  
Signature of Juror or Person Completing Form

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name Here



**Petit Juror Questionnaire      John Doe**

**Si usted no comprende ingles, debe solicitar ayuda llenar el cuestionario**

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**Qualifying Information**

- 1. Are you a resident of Camden County?  YES  NO
  - 2. Are you a citizen of the United States?  YES  NO
  - 3. Can you read and understand English?  YES  NO
  - 4. Are you 18 years of age or older?  YES  NO
  - 5. Are you over the age of 75?  YES  NO
  - 6. If you answer YES to question 5, do you wish to be excused permanently from jury service?  YES  NO
  - 7. Have you been convicted of or pleaded guilty to an indictable criminal offense? Please do not include traffic or disorderly person offenses. State the charge and the year. If you have pending charges, or if you are not sure about your criminal history, please contact the Jury Management Office.  YES  NO

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  - 8. Are you mentally and physically able to perform the functions of a juror?  YES  NO
  - 9. Telephone: \_\_\_\_\_ 10. Email: \_\_\_\_\_
  - 11. Date of Birth: \_\_\_\_/ \_\_\_\_/ \_\_\_\_ 12. Employer: \_\_\_\_\_
  - 13. Occupation: \_\_\_\_\_
  - 14. Are you employed full-time by the State of N.J., or any county, municipality, public school, or college, or any N.J. government agency?  YES  NO
- 

**Demographic Information**

This information helps the Judiciary understand the diversity and representativeness of jury pools. Your responses to these questions are optional and will **not** affect your selection.

- 15. Selecting from the race categories used by the U.S. Census, please select the response that most closely aligns with your racial identity.
    - American Indian or Alaska Native       Native Hawaiian or Other Pacific Islander
    - Asian       White
    - Black or African American       More than one race
  - 16. Selecting from the ethnicity categories used by the U.S. Census, please also select the response that most closely aligns with your ethnic identity.
    - Hispanic or Latino       Not Hispanic or Latino
  - 17. Selecting from the gender categories used by the State of New Jersey, please select the response that most closely aligns with your gender.
    - Female       Male       Non-Binary or Undesignated
- 

**Other Information**

Check only those that apply

- I request to reschedule my summons date.  
Reason: \_\_\_\_\_  
Provide other dates that we will try to accommodate: \_\_\_\_\_
- I wish to request a hardship excuse: \_\_\_\_\_
- I need to correct my name or address: \_\_\_\_\_

**NEW MEXICO**

**49**

**Statewide Juror Qualification Form and Juror  
Questionnaire**

# JUROR QUALIFICATION FORM

*Juror ID Number* \_\_\_\_\_

## Dear Prospective Juror:

Please answer each of the following questions completely. The contact information you provide will be used only by court employees and shall not be made available to the attorneys or parties in the cases that you may be selected to hear as juror.

Estos formularios están disponibles en español en <http://jury.nmcourts.gov>. Si necesita más ayuda en español, llame al número telefónico indicado en la primera página del citatorio para prestar servicio como jurado.

Name as it appears on the summons: \_\_\_\_\_

Legal name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

\_\_\_\_\_ City:

\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone numbers:

Home: \_\_\_\_\_ Business: \_\_\_\_\_ Ext: \_\_\_\_\_

Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_

1. Do you live more than forty (40) roundtrip miles from your home to the courthouse? Yes  No   
If yes, what is your roundtrip mileage? \_\_\_\_\_ Would you like to be compensated for mileage? Yes  No
2. Are you employed by the public schools, local government, or the State of New Mexico? (Note: these public employees cannot be compensated by the court for their jury service. Yes  No
3. Of which New Mexico County are you a resident? \_\_\_\_\_
4. Are you a United States Citizen? Yes  No  If no, country of citizenship: \_\_\_\_\_
5. Will you need an Interpreter? Yes  No   
If yes, which language? \_\_\_\_\_
6. Have you ever been convicted of a felony? Yes  No 
  - a. If yes, please explain: \_\_\_\_\_
  - b. If yes, have you completed all conditions of parole or probation?  
Yes  No .
  - c. If yes, please enclose a copy of one of the following:  
\_\_\_\_\_ Certificate or letter of completion issued by the Department of Corrections of New Mexico, or another state.  
\_\_\_\_\_ Certificate or letter of pardon from the Governor of New Mexico, or another state.

### SELECT ONE:

- I am available to serve for the dates listed on my summons (skip to signature, sign and return form).
- I am requesting a postponement for the reasons noted below until the following date: \_\_\_\_\_ (jury service may be postponed for up to six (6) months).
- I am requesting to be excused or exempted for the reasons noted above. I am submitting the required documents.

REQUEST FOR POSTPONEMENT, EXCUSAL, OR EXEMPTION If your jury service is scheduled for a date that conflicts with your schedule, please request a postponement for a more convenient time.

There are NO AUTOMATIC EXEMPTIONS. All exemptions must be requested, including exemptions based on age or prior jury service.

**ALL situations will be considered on a case by case basis. Please enclose a detailed explanation for cases of:**

- Prior jury service (provide appropriate date(s) of service and court)
- Medical (must submit a current letter on letterhead from healthcare provider)
- Financial hardship (*not being compensated by your employer is not grounds for excusal*)
- Age: \_\_\_\_\_ (persons 75 and older)
- Not a resident of the State of New Mexico or \_\_\_\_\_ County (please submit proof of residency, such as a current driver's license or a voter registration card)
- Caregiver: \_\_\_\_\_ (must submit a current letter on letterhead from healthcare provider)
- Nursing mother (a current letter on letterhead from healthcare provider required if requesting second postponement)
- Students and Teachers (*request to be postponed until school breaks - please provide below the dates when your school break begins and ends*): \_\_\_\_\_

Other: \_\_\_\_\_

**PLEASE NOTE:** Unless you receive a letter from the court stating you are excused from attending jury service, you **MUST** appear on the date required by the court. Not showing up for jury duty when summoned is called Failure to Appear and can result in a fine of up to five hundred dollars (\$500), up to six (6) months in jail, or both. Section 31-19-1 NMSA 1978. You can call the jury division to check on the status of your excusal or postponement.

I swear or affirm that the information I have provided is true and correct to the best of my knowledge. I am aware that failure to submit required documentation may result in the denial of my request.

\_\_\_\_\_  
SIGNATURE OF PROSPECTIVE JUROR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF THE PERSON PREPARING THIS  
FORM, IF DIFFERENT FROM PROSPECTIVE JUROR

\_\_\_\_\_  
DATE

**Please return completed Juror Qualification and Juror Questionnaire forms to the court listed on the summons you received.**  
[Adopted by Supreme Court Order No. 17-8300-016, effective December 31, 2017.]

**JUROR QUESTIONNAIRE**

*Juror ID Number* \_\_\_\_\_

Please answer all questions, 1-20, and **SIGN**. The Juror Questionnaire will be provided to the attorneys, parties, and judges in all cases you may be selected to hear as a juror. The answers you provide will aid in the process of selecting a jury. If you do not understand a question, please place a question mark (?) next to the question. **If you do not have enough room to answer the question, please use the space provided after question 20 or on separate sheet of paper.** If there is a question you would rather discuss with the judge and attorneys in private, please indicate with an asterisk (\*). Thank you for your cooperation.

1. Legal name and former names: \_\_\_\_\_ 2. Gender: \_\_\_\_\_

3. Birth Year: \_\_\_\_\_ 4. What is your race or ethnic background: \_\_\_\_\_

5. In which Neighborhood and/or Area do you live: \_\_\_\_\_

Where else have you lived (*city, state, country*): \_\_\_\_\_

6. What is your marital status:  Single  Married  Domestic Partner  Separated  Divorced  Widowed

7. If you are married or in a domestic partnership, please provide spouse's/partner's full name and occupation: \_\_\_\_\_

8. Do you have any children or step children:  Yes  No How many? \_\_\_ ages \_\_\_\_\_ occupations \_\_\_\_\_

9. Name of current or most recent employer and place of work: \_\_\_\_\_

Occupation/Job title and duties: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

10. How many years of schooling have you completed: \_\_\_\_\_ Highest-level completed/degree \_\_\_\_\_ Major areas of study \_\_\_\_\_

11. Do you belong to or participate in any religious, civic, social, union, professional, fraternal, or recreational organizations:  
Please list all: \_\_\_\_\_

12. Current political party affiliation: \_\_\_\_\_

13. Have you or any member of your immediate family been the victim of a crime?  Yes  No. If yes, who was the victim?  
\_\_\_\_\_ What crime? \_\_\_\_\_ When? \_\_\_\_\_ Was an arrest made?  Yes  No

14. Have you ever served as a juror:  Yes  No (If Yes please Check)  Grand Jury  Civil  Criminal

15. Have you or anyone close to you ever sued anyone, or been sued:  Yes  No  
If yes, please explain: \_\_\_\_\_

16. Have you or an immediate family member ever been an agent, employee, or representative of an insurance company?  Yes  No

17. Have you or an immediate family member been a defendant in a criminal case?  Yes  No  
If yes please explain: \_\_\_\_\_

18. Have you, or any family member ever been employed by a Court; law enforcement agency; a jail or prison; or any attorney's office?  
 Yes  No If yes name of employer: \_\_\_\_\_

19. Do you have a physical or mental disability of which we need to be aware?  Yes  No  
Are you presently taking any medication which may affect your ability to serve as a juror?  Yes  No  
If yes, are there any special accommodations, services, or assistance we can provide during your jury service?  
\_\_\_\_\_

20. Is there any reason you could not serve as a juror?  Yes  No, (If you are requesting an excusal or postponement for this reason, you must complete and submit the Request for Postponement, Excusal, or Exemption Form)  
If yes, please explain: \_\_\_\_\_

Use this space for any additional comments: \_\_\_\_\_

I SWEAR OR AFFIRM THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

\_\_\_\_\_  
Signature of prospective juror or preparer (if different than prospective juror)

\_\_\_\_\_  
Date

**NEW YORK**

**50**

**Statewide Juror Information Card**




# APPENDIX A

The data collection card is 5 ½ x 8 ½.

3/18

## NEW YORK STATE UNIFIED COURT SYSTEM JUROR INFORMATION CARD


New York State Judiciary Law §528 requires the court to collect data about jurors. Thank you for your cooperation.



JRYCRD

| 1. Today's date                |                                   |                                |                                  |                                |                                    | 2. Here to serve as a  |  | 3. You are   |  | 6. Year born |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
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| M                              | M                                 | D                              | D                                | Y                              | Y                                  | <input type="radio"/> Grand Juror or <input type="radio"/> Trial Juror   |  | <input type="radio"/> Male or <input type="radio"/> Female |  | Y            | Y | Y                              | Y                                 |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 0                              | 0                                 | 0                              | 0                                | 0                              | 0                                  | 4. Are you of Hispanic, Latino, or Spanish Origin?   |  |  |  |              |   | 0                              | 0                                 | 0 | 0 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 1                              | 1                                 | 1                              | 1                                | 1                              | 1                                  | <input type="radio"/> Yes (Mexican, Chicano, Puerto Rican, Cuban, Dominican or other Hispanic, Latino or Spanish Origin)   |  |  |  |              |   | 1                              | 1                                 | 1 | 1 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 2                              | 2                                 | 2                              | 2                                | 2                              | 2                                  | <input type="radio"/> No (Not of Hispanic, Latino, or Spanish Origin)  |  |  |  |              |   | 2                              | 2                                 | 2 | 2 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 3                              | 3                                 | 3                              | 3                                | 3                              | 3                                  | 5. Your race   |  |  |  |              |   | 3                              | 3                                 | 3 | 3 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 4                              | 4                                 | 4                              | 4                                | 4                              | 4                                  | <input type="radio"/> White <input type="radio"/> Black or African American  |  |  |  |              |   | 4                              | 4                                 | 4 | 4 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 5                              | 5                                 | 5                              | 5                                | 5                              | 5                                  | <input type="radio"/> Asian <input type="radio"/> Other/ Mixed (Please explain)  |  |  |  |              |   | 5                              | 5                                 | 5 | 5 |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 6                              | 6                                 | 6                              | 6                                | 6                              | 6                                  | <b>7. Your county</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">New York City</th> <th colspan="7">Outside New York City</th> </tr> <tr> <td><input type="radio"/> Bronx</td> <td><input type="radio"/> Albany</td><td><input type="radio"/> Columbia</td><td><input type="radio"/> Greene</td><td><input type="radio"/> Nassau</td><td><input type="radio"/> Putnam</td><td><input type="radio"/> Steuben</td><td><input type="radio"/> Westchester</td> </tr> <tr> <td><input type="radio"/> Kings</td> <td><input type="radio"/> Allegany</td><td><input type="radio"/> Cortland</td><td><input type="radio"/> Hamilton</td><td><input type="radio"/> Niagara</td><td><input type="radio"/> Rensselaer</td><td><input type="radio"/> Suffolk</td><td><input type="radio"/> Wyoming</td> </tr> <tr> <td><input type="radio"/> New York</td> <td><input type="radio"/> Broome</td><td><input type="radio"/> Delaware</td><td><input type="radio"/> Herkimer</td><td><input type="radio"/> Oneida</td><td><input type="radio"/> Rockland</td><td><input type="radio"/> Sullivan</td><td><input type="radio"/> Yates</td> </tr> <tr> <td><input type="radio"/> Queens</td> <td><input type="radio"/> Cattaraugus</td><td><input type="radio"/> Dutchess</td><td><input type="radio"/> Jefferson</td><td><input type="radio"/> Onondaga</td><td><input type="radio"/> St. Lawrence</td><td><input type="radio"/> Tioga</td><td></td> </tr> <tr> <td><input type="radio"/> Richmond</td> <td><input type="radio"/> Cayuga</td><td><input type="radio"/> Erie</td><td><input type="radio"/> Lewis</td><td><input type="radio"/> Ontario</td><td><input type="radio"/> Saratoga</td><td><input type="radio"/> Tompkins</td><td></td> </tr> <tr> <td></td> <td><input type="radio"/> Chautauqua</td><td><input type="radio"/> Essex</td><td><input type="radio"/> Livingston</td><td><input type="radio"/> Orange</td><td><input type="radio"/> Schenectady</td><td><input type="radio"/> Ulster</td><td></td> </tr> <tr> <td></td> <td><input type="radio"/> Chemung</td><td><input type="radio"/> Franklin</td><td><input type="radio"/> Madison</td><td><input type="radio"/> Orleans</td><td><input type="radio"/> Schoharie</td><td><input type="radio"/> Warren</td><td></td> </tr> <tr> <td></td> <td><input type="radio"/> Chenango</td><td><input type="radio"/> Fulton</td><td><input type="radio"/> Monroe</td><td><input type="radio"/> Oswego</td><td><input type="radio"/> Schuylar</td><td><input type="radio"/> Washington</td><td></td> </tr> <tr> <td></td> <td><input type="radio"/> Clinton</td><td><input type="radio"/> Genesee</td><td><input type="radio"/> Montgomery</td><td><input type="radio"/> Otsego</td><td><input type="radio"/> Seneca</td><td><input type="radio"/> Wayne</td><td></td> </tr> </table> |  |  |  |              |   | New York City                  | Outside New York City             |   |   |  |  |  |  | <input type="radio"/> Bronx | <input type="radio"/> Albany | <input type="radio"/> Columbia | <input type="radio"/> Greene | <input type="radio"/> Nassau | <input type="radio"/> Putnam | <input type="radio"/> Steuben | <input type="radio"/> Westchester | <input type="radio"/> Kings | <input type="radio"/> Allegany | <input type="radio"/> Cortland | <input type="radio"/> Hamilton | <input type="radio"/> Niagara | <input type="radio"/> Rensselaer | <input type="radio"/> Suffolk | <input type="radio"/> Wyoming | <input type="radio"/> New York | <input type="radio"/> Broome | <input type="radio"/> Delaware | <input type="radio"/> Herkimer | <input type="radio"/> Oneida | <input type="radio"/> Rockland | <input type="radio"/> Sullivan | <input type="radio"/> Yates | <input type="radio"/> Queens | <input type="radio"/> Cattaraugus | <input type="radio"/> Dutchess | <input type="radio"/> Jefferson | <input type="radio"/> Onondaga | <input type="radio"/> St. Lawrence | <input type="radio"/> Tioga |  | <input type="radio"/> Richmond | <input type="radio"/> Cayuga | <input type="radio"/> Erie | <input type="radio"/> Lewis | <input type="radio"/> Ontario | <input type="radio"/> Saratoga | <input type="radio"/> Tompkins |  |  | <input type="radio"/> Chautauqua | <input type="radio"/> Essex | <input type="radio"/> Livingston | <input type="radio"/> Orange | <input type="radio"/> Schenectady | <input type="radio"/> Ulster |  |  | <input type="radio"/> Chemung | <input type="radio"/> Franklin | <input type="radio"/> Madison | <input type="radio"/> Orleans | <input type="radio"/> Schoharie | <input type="radio"/> Warren |  |  | <input type="radio"/> Chenango | <input type="radio"/> Fulton | <input type="radio"/> Monroe | <input type="radio"/> Oswego | <input type="radio"/> Schuylar | <input type="radio"/> Washington |  |  | <input type="radio"/> Clinton | <input type="radio"/> Genesee | <input type="radio"/> Montgomery | <input type="radio"/> Otsego | <input type="radio"/> Seneca | <input type="radio"/> Wayne |  | 6 | 6 | 6 | 6 |
| New York City                  | Outside New York City             |                                |                                  |                                |                                    |  |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
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| <input type="radio"/> Kings    | <input type="radio"/> Allegany    | <input type="radio"/> Cortland | <input type="radio"/> Hamilton   | <input type="radio"/> Niagara  | <input type="radio"/> Rensselaer   |  |  |  |  |              |   | <input type="radio"/> Suffolk  | <input type="radio"/> Wyoming     |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| <input type="radio"/> New York | <input type="radio"/> Broome      | <input type="radio"/> Delaware | <input type="radio"/> Herkimer   | <input type="radio"/> Oneida   | <input type="radio"/> Rockland     |  |  |  |  |              |   | <input type="radio"/> Sullivan | <input type="radio"/> Yates       |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
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| <input type="radio"/> Richmond | <input type="radio"/> Cayuga      | <input type="radio"/> Erie     | <input type="radio"/> Lewis      | <input type="radio"/> Ontario  | <input type="radio"/> Saratoga     | <input type="radio"/> Tompkins   |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
|                                | <input type="radio"/> Chautauqua  | <input type="radio"/> Essex    | <input type="radio"/> Livingston | <input type="radio"/> Orange   | <input type="radio"/> Schenectady  | <input type="radio"/> Ulster   |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
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|                                | <input type="radio"/> Chenango    | <input type="radio"/> Fulton   | <input type="radio"/> Monroe     | <input type="radio"/> Oswego   | <input type="radio"/> Schuylar     | <input type="radio"/> Washington   |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
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| 7                              | 7                                 | 7                              | 7                                | 7                              | 7                                  |  |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 8                              | 8                                 | 8                              | 8                                | 8                              | 8                                  |  |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |
| 9                              | 9                                 | 9                              | 9                                | 9                              | 9                                  |  |  |  |  |              |   |                                |                                   |   |   |  |  |  |  |                             |                              |                                |                              |                              |                              |                               |                                   |                             |                                |                                |                                |                               |                                  |                               |                               |                                |                              |                                |                                |                              |                                |                                |                             |                              |                                   |                                |                                 |                                |                                    |                             |  |                                |                              |                            |                             |                               |                                |                                |  |  |                                  |                             |                                  |                              |                                   |                              |  |  |                               |                                |                               |                               |                                 |                              |  |  |                                |                              |                              |                              |                                |                                  |  |  |                               |                               |                                  |                              |                              |                             |  |   |   |   |   |

3/18



## NEW YORK STATE UNIFIED COURT SYSTEM JUROR INFORMATION CARD

New York State Judiciary Law §528 requires the court to collect data about jurors. Thank you for your cooperation.

| Please answer all questions on the front of this card.   | Judiciary Law §528. Collection of demographic data.   |
|--|---|
| <ul style="list-style-type: none"> <li>Use a dark pencil or blue or black pen.</li> <li>Do not use pens with ink that soaks through the paper.</li> <li>No stray marks, folding or tearing the card.</li> <li>Make solid marks that fill the circle completely.</li> <li>● CORRECT MARK</li> </ul> | <p>The commissioner of jurors shall collect demographic data for jurors who present for jury service, including each juror's race and/or ethnicity, age and sex, and the chief administrator of the courts shall submit the data in an annual report to the governor, the speaker of the assembly, the temporary president of the senate and the chief judge of the court of appeals.</p> |

**NORTH CAROLINA**

**51**

**Juror Questionnaire**

## JUROR QUESTIONNAIRE

Thank you for your service as a juror!

This questionnaire is designed to determine whether it is appropriate for you to serve as a juror in this case, and to excuse you at the earliest possible moment if you should be excused, without requiring you to be in a closed space with other jurors for an extended period of time.

Beginning right now, even if you are not called to the jury box, it is extremely important that you observe the rules below. (Violation of these rules could be considered as contempt of court.)

### RULES FOR ALL JURORS

1. Please answer the questions below fully and truthfully.
2. Do not talk among yourselves (with other jurors) about the case described below except in the jury room after your deliberations have begun.
3. Do not talk to anyone else, or to allow anyone else to talk with you or in your presence about the case to be tried, including the charge(s), the defendant, publicity about the case, the lawyers, witnesses or anything else remotely connected to the case.
4. Please report to the judge immediately if anyone talks to you about the case or attempts to communicate with you, or in your presence, about the case.
5. Do not form an opinion about the guilt or innocence of the defendant or express any opinion about the case until the judge has instructed you to begin deliberations.
6. Do not read, watch, or listen to media accounts of the trial.
7. Do not make any private investigation about the case, either as to the facts or the law, including internet searches or visits to the scene of the alleged crime. You must keep an open mind, and your verdict must be based exclusively on the evidence presented at the trial and the law that will be explained to you by the judge.

The Court has called the following case for trial:

1. Name of defendant charged: \_\_\_\_\_.
2. Charge(s) against defendant: \_\_\_\_\_.
3. Date of the alleged offense(s): \_\_\_\_\_.
4. Name of any alleged victim: \_\_\_\_\_.
5. Defendant has pleaded not guilty to the charge(s).
6. The court estimates your jury service on this case will be required until 5 o'clock p.m. on \_\_\_\_\_. Court will begin each day at 9:30 a.m. and conclude at 5 p.m., with a lunch break from 12:30 to 2:00.
7. The State (which has the burden of proof beyond a reasonable doubt) intends to call the following witnesses in this case:

8. The Defendant (who is presumed innocent, and who is not required to present any evidence at all, or testify, or call any other witnesses) may choose to call the following witnesses:

9. Further information: \_\_\_\_\_ . **(Counsel here will list any appropriate affirmative defense. If none this item will be deleted.)**

Your questionnaires will not be shared with anyone other than the attorneys, the judge, and other court personnel as may be absolutely necessary, although you may be questioned further in open court by the lawyers or the judge about these matters if you are one of the 12 persons called to the jury box.

Please answer the following questions truthfully and to the best of your ability.

1. Are you a U.S. citizen? \_\_\_\_\_.
2. Are you a citizen of \_\_\_\_\_ County? \_\_\_\_\_.
3. How old are you? \_\_\_\_\_ years.
4. Have you been a juror in a state or federal trial during the last two years? \_\_\_\_\_.
5. Have you served a full term as a grand juror in the last 6 years? \_\_\_\_\_.
6. Have you ever been convicted of (or pled guilty or no contest to) a felony? (If your citizenship has been restored<sup>i</sup> you may answer “no”.) \_\_\_\_\_.
7. Who is your employer? (present or from which you are retired) \_\_\_\_\_.  
(or state whether you are disabled, homemaker, or unemployed)
8. Name of your spouse/partner/significant-other, and employer of that person: name: \_\_\_\_\_; employer: \_\_\_\_\_.
9. What is your primary residential address? \_\_\_\_\_.
10. Considering the estimated length of the trial (see above) please list all appointments, or other pre-existing, unbreakable time commitments (including care for a family member) that would make your jury service impossible for any part of the trial.  
\_\_\_\_\_
11. Please list any health concerns not related to Covid-19, such as being unable to sit for long periods, hearing or vision problems, cognitive concerns (including if you have ever been adjudged incompetent) \_\_\_\_\_.
12. Do you have a firmly held religious conviction that would be violated by “sitting in judgment” on a fellow citizen? \_\_\_\_\_. If “yes”, please explain:  
\_\_\_\_\_.
13. Please state whether you or any member of your family:

- a. Has worked in either attorney's firm or otherwise had business relations with such attorney \_\_\_\_\_. If "yes", please explain: \_\_\_\_\_.
- b. Is related by blood or marriage to an attorney (including staff who will be present during the trial), or the defendant, or a witness, or any court personnel \_\_\_\_\_. If "yes", please give details: \_\_\_\_\_.
14. Please state any other reason at all that would make it inappropriate to sit as a juror on the case to be tried \_\_\_\_\_.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Juror

\_\_\_\_\_  
Printed Name of Juror

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<sup>i</sup> In North Carolina, a felon's rights are automatically restored upon the occurrence of any one of the following conditions: **(1)** The unconditional discharge of an inmate, of a probationer, or of a parolee by the agency of the State having jurisdiction of that person or of a defendant under a suspended sentence by the court. **(2)** The unconditional pardon of the offender. **(3)** The satisfaction by the offender of all conditions of a conditional pardon. **(4)** With regard to any person convicted of a crime against the United States, the unconditional discharge of such person by the agency of the United States having jurisdiction of such person, the unconditional pardon of such person or the satisfaction by such person of a conditional pardon. **(5)** With regard to any person convicted of a crime in another state, the unconditional discharge of such person by the agency of that state having jurisdiction of such person, the unconditional pardon of such person or the satisfaction by such person of a conditional pardon. [N.C. Gen. Stat. § 13-1](#)

**NORTH DAKOTA**



**58**

**Statewide Juror Information Questionnaire**

PLEASE NOTE ANY ADDRESS CHANGES BELOW



Candidate ID:0001222115

Pool ID:0009221004

State law requires you to answer the questions on this form. The form must be signed and returned within 5 days.

**Juror Qualification**

- 1. Have you served on a North Dakota District Court jury in the past 24 months? YES NO
- 1a. If you answered YES to question 1, do you wish to be excused from jury service at this time? YES NO
- 2. Are you a citizen of the United States?" YES NO
- 3. Are you a resident of the county in which you are being summoned?" YES NO
- 3a. I am temporarily residing at (address) \_\_\_\_\_  
I expect to return (date mm/dd/yyyy) \_\_\_\_\_
- 4. Are you, with reasonable accommodation, able to communicate and understand the English language? YES NO
- 5. Are you at least 18 years of age? YES NO
- 6. Do you have a physical or mental disability which would affect your ability to serve on a jury and that may require reasonable accommodation? (Please provide physician's certificate for confirmation) YES NO
- 7. Have you lost the right to vote because of CURRENT imprisonment? YES NO
- 8. Are you 72 years of age or older? YES NO
- 8a. If you answered YES to number 8, do you wish to be excused from jury service this time only? YES NO
- 8b. If you answered YES to number 8a, do you wish to be excused now and for any future service? YES NO

Mileage (Round Trip) \_\_\_\_\_ Email - \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Providing an email and cell phone number allows us to send you updates on your jury service.**

I hereby declare that the responses to the questions on this form are true to the best of my knowledge. I also understand that a willful misrepresentation of a material fact may be punished by a fine of not more than one thousand dollars or imprisonment for not more than thirty days, or both.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Minority Justice Implementation Committee is doing a study of the jury selection process in an attempt to ensure that jury lists adequately represent all race and ethnic groups in North Dakota. The Committee requests that you fill out this survey to assist in this study.

Your participation in this survey does NOT affect your eligibility for jury service. You are NOT required to answer this survey question.

What is your race/ethnicity?

- ( ) Asian ( ) Multiracial ( ) White
- ( ) Black ( ) Native American/Alaskan ( ) Other
- ( ) Hispanic/Latino(a) ( ) Native Hawaiian or Pacific Islander ( ) No Response

**THIS FORM, WHEN COMPLETED AND SUBMITTED, MAY BE COPIED AND PROVIDED TO ATTORNEYS FOR PARTIES IN THE CASE FOR WHICH THE JUROR IS SELECTED**

**Please return this completed questionnaire to:  
Brittany Leadbetter, Clerk of Court  
P.O. Box 2806, 211 S. 9th Street  
Fargo, ND 58108**

**OHIO**

**53**

**Lake County – Juror Qualification Questionnaire**

**JUROR QUALIFICATION QUESTIONNAIRE LAKE COUNTY, OHIO, COMMON PLEAS COURT - GENERAL DIVISION JUDGE PATRICK J. CONDON**

**INSTRUCTIONS** It is the policy of this state that every qualified citizen has an obligation to serve as a juror when summoned by the courts of this state unless the citizen is excused as provided in Chapter 2313 of the Revised Code. Jury duty affords members of the public the opportunity to obtain insight into the workings of the justice system. Through direct participation, each citizen can observe and contribute to the administration of justice as prescribed under the United States and Ohio constitutions. Service as a juror should be a learning experience and, hopefully, a rewarding and gratifying experience. Acceptance of this duty will enable you to become involved in the judicial process under which we live. Below is a questionnaire that must be completed in its entirety. **Please start it within five days of your receipt of the summons.** The questionnaire should take about 20 minutes to complete. The purpose of this questionnaire is to expedite the examination of prospective jurors and shorten the amount of time needed for jury selection, and thus, avoid as much inconvenience to you as possible. Please be sure to answer all questions promptly. A completed questionnaire by all jurors will significantly shorten the jury selection process of a trial. You must complete the questionnaire within six days of starting it. Your answers will be saved (as long as you have not cleared your cache/browsing data on your device) and you may make changes, using the back button. Once you have started the questionnaire, if you pause and come back later, you will return to where you left off. Once you submit it, you cannot make any changes to the questionnaire. The court must have this information entered electronically, and prefers that you complete the questionnaire on-line on your smartphone or computer. If you do not have access to a smartphone, or to a computer in your home, office, or public library, you may come to the court's office in the Lake County Court House, 47 North Park Place, Painesville, Ohio 44077, and use one of the court's computers. If none of those options are available, you may call the court at the telephone number on your summons, and request that a paper copy be mailed to you, and upon receipt, legibly complete it in ink and sign it, and deliver or mail it to the court, addressed to Judge Condon, at 47 North Park Place, Painesville, Ohio 44077. **The responses to these questions may be subject to public disclosure. You have the right to request a private hearing on the record with counsel for the parties present regarding any question to be answered on this form.** Failure to complete this questionnaire will not relieve you of your obligation to report on the date noted on your summons and you may be required to answer the questions in open court. Your answers to these questions are considered to be under oath or affirmation and must be truthful to the best of your knowledge, information, and belief. A false statement in this official proceeding is considered material, and may result in criminal charges of perjury and/or falsification. **The court will rely on the truth of your answers in performing the court's official function to administer justice in a fair and impartial manner.** Your cooperation is greatly appreciated. For information regarding your service, including parking, driving directions, and requests for excusal or deferment, please visit the court's website at:

**<https://www.lakecountyohio.gov/cpcgd/Jury/Judge-Condon>**

**QUESTIONS**

Enter the six-digit Sequence Number that appears at the top portion of your summons.

---

Do you understand that your answers to these questions are considered to be given under your oath or affirmation that they are true to the best of your knowledge, information, and belief, and that the court will rely on the truth of your answers in the court's official function to administer justice to all persons in a fair and impartial manner, and that any false statement in this official proceeding will be considered material and, thus, criminal perjury or falsification?

- Yes

JUROR's full name

---

If the prospective juror received assistance from anyone in preparing or furnishing any answers to these questions, state that person's name and relationship to the prospective juror, and the reason for the assistance.

- Yes - enter person's name (1) \_\_\_\_\_
- No

Relationship to prospective juror

---

Reason for the assistance

---

City/Village/Township of residence

- Concord Township
- Eastlake
- Fairport Harbor Village
- Grand River Village
- Kirtland
- Kirtland Hills Village
- Lakeline Village
- Leroy Township
- Madison Township
- Madison Village
- Mentor
- Mentor-On-The-Lake
- North Perry Village
- Painesville
- Painesville Township
- Perry Township
- Perry Village
- Timberlake Village
- Waite Hill Village
- Wickliffe
- Willoughby
- Willoughby Hills
- Willowick
- I am not a resident of Lake County

Street address of residence

---

Is this address the same as the address on the summons you received?

- Yes
- No

Do you have a cellular phone?

- Yes
- No

Cellular or mobile telephone number (with area code) \_\_\_\_\_

May we contact you via text messaging to provide updates and NOTIFICATIONS regarding your jury duty (messaging rates may apply), including on weekends and holidays?

- Yes
- No

Email address \_\_\_\_\_

May we contact you via email to provide updates and NOTIFICATIONS regarding you jury duty, including on weekends and holidays?

- Yes
- No

What is the most reliable way for the court to notify you promptly, efficiently and on short notice regarding your jury service? CHECK ALL THAT APPLY.

- Home telephone \_\_\_\_\_
- Work telephone \_\_\_\_\_
- Voice call to the cellular number previously entered
- Text message to the cellular number previously entered
- Email to the address previously entered

Age \_\_\_\_\_

If you are older than 75, do you wish to be excused from jury service due to age?

- Yes
- No

Have you been convicted in any jurisdiction within the United States of a felony offense?

- Yes - Please list court of record \_\_\_\_\_
- No



If you have been convicted of a felony, are you still on community control sanctions, probation, parole or post-release control?

- Yes
- No

Your place of employment. If none, please state unemployed, disabled, in school, retired or other reason.

---

Your current occupation or job title \_\_\_\_\_

If unemployed or disabled, what were your previous occupations?

---

What is your highest level of education?

- Did not graduate high school
- High school graduate
- Some college
- Associate degree
- Bachelor's degree
- Postgraduate or professional degree

What is your current marital status? \_\_\_\_\_

If you are currently married or living with a domestic partner, please state that person's place of employment and occupation.

---

Please state the number of children you have and their occupations, if applicable.

---

Do you have a valid driver's license?

- Yes
- No

Are you a member of any social, civic, fraternal or recreational clubs? If so, please list them.

---

Have you served in the Armed Forces? If so, please list your branch of service. \_\_\_\_\_

Have you or any member of your immediate family been a plaintiff or defendant in a lawsuit?

- Yes
- No
- I prefer not to answer this question now, but wish to answer it on the record.

Do you have any legal training or law enforcement experience? If yes, please explain.

- Yes \_\_\_\_\_
- No

Do you have any religious, moral, or philosophical views that may affect your ability to serve as a juror?

- Yes
- No
- I prefer not to answer this question now, but wish to answer it on the record.

Please explain any religious, moral or philosophical views that may affect your ability to serve as a juror.

---

Have you ever previously served as a juror?

- Yes (state the number of times) \_\_\_\_\_
- No

Have you or a member of your family ever filed a workers' compensation claim?

- Yes
- No

Do you have any difficulty hearing or seeing? If yes, please explain.

- Yes \_\_\_\_\_
- No

Are you physically able to serve as a juror?

- Yes
- No

Please explain why you are not physically able to serve as a juror.

---

Do you have family members or close friends who are attorneys?

- Yes
- No

Do you have any family members or close friends who are in law enforcement or security?

- Yes
- No

Do you have any very strong feelings (positive or negative) about attorneys or law enforcement officers?  
If yes, please explain.

- Yes \_\_\_\_\_
- No

Have you or a close family member ever been accused or convicted of a crime, not including minor traffic offenses?

- Yes
- No

Have you or a close family member ever been the victim of a crime?

- Yes
- No

Are you, a member of your immediate family, or a close friend chemical or drug dependent or in the past been chemical or drug dependent?

- Yes
- No

Do you know, or have you had experience with, someone who has a mental health issue?

- Yes (please describe) \_\_\_\_\_
- No
- I prefer not to answer this question now, but wish to answer it on the record.

Which of the following statements best describes your feelings about the death penalty? Choose only 1.

- I believe that the death penalty should be imposed in all capital murder cases.
- I believe that the death penalty is appropriate in some capital murder cases and I could return a verdict resulting in death in a proper case.
- Although I do not believe that the death penalty should ever be imposed, as long as the law provides for it, I could assess it under the proper set of circumstances.
- I believe the death penalty is appropriate in some capital murder cases, but I could never return a verdict which assessed the death penalty.
- I could never, under any circumstances, return a verdict which assessed the death penalty.
- I prefer not to answer this question now, but wish to answer it on the record.

Is there any reason you cannot serve as a juror?

- Yes (please explain) \_\_\_\_\_
- No

If you would like to request excusal or deferment, you must contact the court in one of the following ways:

E-mail: [jury5@lakecountyohio.gov](mailto:jury5@lakecountyohio.gov) (this is the preferred method)

US Mail or hand delivered to: Judge Patrick J. Condon, Lake County Court house, 47 North Park Place, Painesville, OH 44077

Telephone: 440-350-2723

The court cannot consider requests for excusal or deferment without a request to the court by one of the methods listed above. Please acknowledge that you understand this requirement by checking "yes."

- Yes

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please sign and attest that your answers to foregoing questions are true.

\_\_\_\_\_

**54**

**Ross County – Common Pleas Juror  
Questionnaire**

# ROSS COUNTY COMMON PLEAS JUROR QUESTIONNAIRE

PLEASE READ & ANSWER THE FOLLOWING QUESTIONS FULLY. IF YOU HAVE ANY QUESTIONS AND/OR CONCERNS REGARDING ANY LEGITIMATE PRIVACY INTEREST, YOU HAVE THE RIGHT TO REQUEST A PRIVATE HEARING TO BE CONDUCTED ON THE RECORD WITH COUNSEL FOR ALL PARTIES PRESENT.

IF ADDITIONAL SPACE IS NEEDED TO ANSWER ANY QUESTION,  
PLEASE USE THE BACK OF THIS FORM

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Work telephone \_\_\_\_\_

Age \_\_\_\_\_ Sex: (Male) \_\_\_\_\_ (Female) \_\_\_\_\_

Please give the name, address, and phone number of a person to contact in case of an emergency:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

How many years have you been a resident of Ross County? \_\_\_\_\_

Education completed through: Grade School \_\_\_\_\_ High School \_\_\_\_\_ College \_\_\_\_\_

Graduate degrees received: \_\_\_\_\_

Are you employed outside the home? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, where? \_\_\_\_\_ Occupation: \_\_\_\_\_

If you are retired **or** unemployed, give last occupation and employer:

\_\_\_\_\_

If you are a student, give school name and address:

\_\_\_\_\_

Marital Status:

Married \_\_\_\_\_ Divorced \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Widow(er) \_\_\_\_\_

If married **and/or** widow/widower **and/or** separated **does/did** your spouse work outside the home?

Yes \_\_\_\_\_ No \_\_\_\_\_

List living members of your family: (spouse and children only)

| Name | Relationship | Age | Living w/you | Occupation | Employer |
|------|--------------|-----|--------------|------------|----------|
|------|--------------|-----|--------------|------------|----------|

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you or any member of your immediate family ever been employed by any governmental body ? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, list the name of person and the governmental body: \_\_\_\_\_  
\_\_\_\_\_

Do you drink alcoholic beverages? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you hold any religious or moral convictions about the use of alcohol ? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a member or contributor to any organization , the purpose of which is to advocate restrictions on the use of alcoholic beverages by others? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever served on a jury before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when and in what court? \_\_\_\_\_

If a criminal juror, what was the type of charge? \_\_\_\_\_

If civil, what kind of case? \_\_\_\_\_

Have you or a member of your immediate family ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you or a member of your immediate family ever been a victim of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Are you related to or a close friend of any law enforcement officer or security officer? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, who and what police agency? \_\_\_\_\_

Have you had any law enforcement or legal training? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you related to or a close friend of any of the following :

County Prosecutor Yes \_\_\_\_\_ No \_\_\_\_\_      Public Defender Yes \_\_\_\_\_ No \_\_\_\_\_  
Private Attorney Yes \_\_\_\_\_ No \_\_\_\_\_

Employees of any of the above Yes \_\_\_\_\_ No \_\_\_\_\_

If yes to any of the above, who? \_\_\_\_\_

If you have been represented by a legal counsel for any matters , please list the lawyer's name:

\_\_\_\_\_

Do you get most of your news from: (circle one)      Newspapers      Magazines  
Radio      Television

What newspapers/news magazines do you read regularly? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Which news programs do you listen to or watch most often? \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_\_ (Date Signed)



**OKLAHOMA**

**55**

**Jury Summons**



DISTRICT COURT OF OKLAHOMA COUNTY  
 320 ROBERT S. KERR  
 OKLAHOMA CITY, OK 73102

**SUMMONS for JURY SERVICE**

**REPORTING INFORMATION**  
**REPORT DATE:** 10/31/2022  
**TIME:** 08:00 AM  
**REPORTING LOCATION:**  
 DISTRICT COURT OF OKLAHOMA COUNTY  
 1ST FLOOR, ROOM 101 OKLAHOMA COUNTY  
 COURTHOUSE  
 320 ROBERT S. KERR  
 OKLAHOMA CITY, OK 73102  
**CANDIDATE ID:** 0127971698

[REDACTED]



**JURY SUMMONS**  
**IMPORTANT INFORMATION - PLEASE READ CAREFULLY**

**YOU HAVE BEEN SELECTED TO SERVE AS A JUROR IN DISTRICT COURT.**  
**PLEASE SEE REVERSE SIDE FOR MANDATORY REPORTING INSTRUCTIONS.**

**YOU ARE HEREBY SUMMONED AND COMMANDED personally to appear before the DISTRICT COURT, to serve on your listed reporting date as a Petit Juror.**

The laws of the state of Oklahoma provide that all citizens of the United States, residing in this state, having the qualifications of electors of this state, are competent to serve as jurors within their counties, provided that:

Persons over 70 years of age and persons who have served as grand or petit jurors during the last five (5) calendar years shall not be compelled to serve as jurors.

The Court may excuse or discharge any prospective juror if the juror has a physical or mental condition that causes him or her to be incapable of performing jury service, or if jury service would cause undue or extreme physical or financial hardship.

**The following persons are not qualified to serve as jurors:**

|                                    |   |
|------------------------------------|---|
| Justices of the Supreme Court      | Licensed attorneys engaged in the practice of law   |
| Appellate or District Court Judges | Persons who have been convicted of any felony or served a term of imprisonment in any penitentiary, state or federal, for the commission of a felony; provided any such citizen convicted, who has been fully restored to his civil rights, shall be eligible to serve as a juror |
| Sheriffs or deputy sheriffs        | Legislators during session of the Legislature or involved in state business   |
| Federal law enforcement officers   | Municipal or state law enforcement officers employed in any county with a population of 255,000 or more   |


Jailers, or municipal or state law enforcement officers in a county with a population of less than two hundred fifty-five thousand (255,000), are eligible to serve on noncriminal actions only.

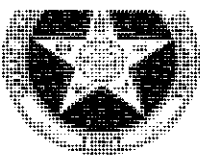
**Upon request, a person shall be exempt from jury service if the person is:**

|  |                                |
|--|--------------------------------|
| A member of the Armed Forces of the United States who is serving on active duty during a time of war or declared hostilities | A mother who is breast feeding |
|--|--------------------------------|

**Dress Code:** Please dress appropriately. You will be appearing in court. Attire such as shorts, t-shirts, miniskirts, tank tops, cropped tops, ripped jeans, hats/ball caps, and flip flops are NOT appropriate.

**Please see reverse side for mandatory reporting instructions**

  
**JUROR NUMBER:** 0127971698  
**SUMMONS DATE:** 10/31/2022  
**GROUP NUMBER:** 00001  
 Report to: DISTRICT COURT OF OKLAHOMA COUNTY  
**JUROR**



320 Robert S. Kerr, Room 409  
Oklahoma City, Oklahoma 73102

U.S. POSTAGE PAID  
BLANKET MAIL PERMIT NO. 96



\*\*\*\*\*AUTO\*\*ALL FOR AADC 730



B1  
C12  
P2  
002722



**IMPORTANT: JURY SUMMONS ENCLOSED**  
IMMEDIATE ATTENTION IS REQUIRED

**RICK WARREN COURT CLERK, OKLAHOMA COUNTY**  
**IMPORTANT INFORMATION – PLEASE READ CAREFULLY**  
**YOU MUST BE A RESIDENT OF OKLAHOMA COUNTY**

**ALL PROSPECTIVE JURORS SHOULD GO ONLINE AT [HTTPS://JUROR.OSCN.NET](https://juror.oscn.net)**  
**ONE WEEK PRIOR TO YOUR REPORTING DATE TO**  
**COMPLETE YOUR JUROR INFORMATION**  
**PLEASE REMEMBER TO BRING THIS SUMMONS WITH YOU WHEN YOU REPORT**

The normal period of jury service is one week, BUT MAY LAST LONGER.

1. Please request a disqualification or exemption by going online at <https://juror.oscn.net> 10 days prior to your reporting date or by calling 1-855-316-4847.
2. If you request an exemption based on illness or disability, you must provide a written statement from your physician stating your condition that makes you unable to perform jury service.
3. If you request an exemption based on extreme financial hardship, you must provide a written statement.
4. If you request disqualification because you are not a citizen of the United States, you must provide a copy of your residency card.

If your request has not been approved or you do not have access to the internet please bring any papers supporting your excuse with you to the Jury Excuse Hearing at 3:00 o'clock p.m. on the Friday immediately before the Monday on which your jury duty is scheduled to begin.

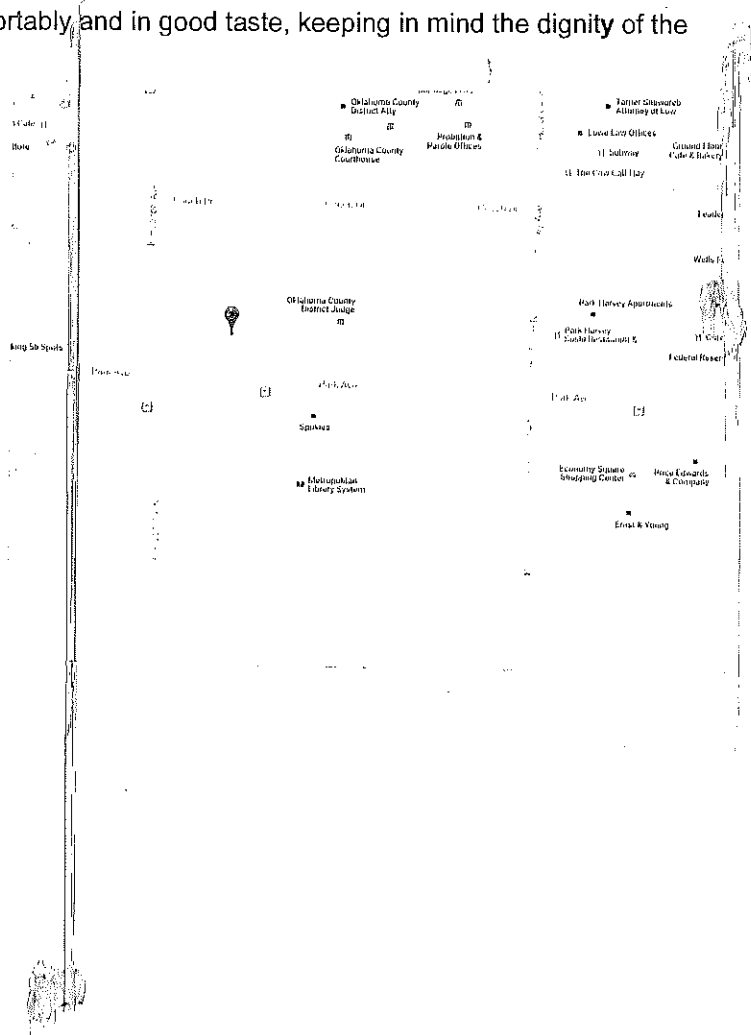
**Appropriate Court attire is required.** Jurors should dress comfortably and in good taste, keeping in mind the dignity of the courtroom and the seriousness of the matters to be decided.

**You will receive \$20.00 for each day of attendance and mileage reimbursement. Payment is made approximately one month after you complete your jury service.**

Security measures similar to airports are in place at the Oklahoma County Courthouse. Please do not bring any object with you that would violate those measures. You will either have to take the item(s) back to your car or they will be confiscated prior to entry into the courthouse complex.

**JURY SERVICE IS AN IMPORTANT CIVIC RESPONSIBILITY AND YOUR FAILURE TO REPORT FOR JURY SERVICE MAY RESULT IN YOU BEING FOUND GUILTY OF CONTEMPT OF COURT WHICH IS PUNISHABLE BY A FINE AND/OR COMMUNITY SERVICE.**

Oklahoma County Jury Clerk – 713-1722  
For more information: [www.oklahomacounty.org/courtclerk/](http://www.oklahomacounty.org/courtclerk/)  
For changes in courthouse opening hours because of weather call 713-1111.



Witness my hand and official seal:  
  
*Rick Warren*  
Rick Warren, COURT CLERK

**OREGON**

**56**

**Statewide General Juror Questionnaire**

Questions that are asked of jurors to determine their eligibility are based on:

- [ORS 10.030 Eligibility for Jury Service; Discrimination Prohibited](#),
- [ORS 10.050 Excuse from Jury Duty](#),
- [ORS 10.055 Deferment of Jury Service](#), and
- [ORS 10.245 Determining Eligibility of Jurors; Eligibility Form; Effect of False Statements or Failure to Respond](#).

Questions that are asked in our online juror response are as follows:

1. Please select the county that summoned the juror for service:
2. Are you responding to your own summons to serve as a juror, or are you completing this response form for somebody else?
3. Please verify the name and address of the summoned juror.
4. Please enter any additional contact information: (email is required for the online response, phone numbers are optional.)
5. Do any of the following disqualification reasons apply:
  - The juror is deceased;
  - The juror is currently incarcerated;
  - The juror has served as a juror for a Federal or Circuit Court within Oregon within the past 24 months;
  - The Juror will be younger than 18 years at the time of jury service;
  - The juror is not a U.S. Citizen;
  - The juror is no longer a resident of the summoning county;
  - The juror has been sentenced to a qualifying felony or misdemeanor crime. (*Qualifying crimes include a conviction of a felony or having served a felony sentence within the last 15 years; or a conviction of a misdemeanor involving violence or dishonesty, or having served a misdemeanor sentence based on a misdemeanor involving violence or dishonesty, within the five years immediately preceding the date the person is required to report for jury service.*)
  - a. *If yes is selected for question 5*, select the disqualifying reason that applies.
    - i. *If Qualifying Felony Sentence or Conviction or Qualifying Misdemeanor Sentence or Conviction is selected*, provide a case number or conviction information for the Jury Coordinator to verify.
  - b. *If no is selected for question 5*, juror moves on to question 6.
6. Do any of the following exemption reason apply:
  - The juror is currently breast-feeding;
  - The juror is the sole care giver of a child or dependent;
  - The juror will be 70 years of age or older at the time of service and wished to be exempt; or
  - Will jury service be a hardship due to language, medical, military, or other reasons?

NOTE: Select "Yes" to indicate a hardship and submit a request to be exempt from Jury service. If the juror is eligible to serve or will request a deferral to a different service term, select "No" to continue with the interview.

  - a. *If yes is selected for question 6*, select the exemption reason that applies.





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**Multnomah County – Jury Summons with  
Qualification Questionnaire**

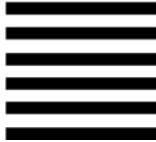


NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 1192 PORTLAND, OR

POSTAGE WILL BE PAID BY ADDRESSEE

JURY COORDINATOR  
MULTNOMAH COUNTY CIRCUIT COURT  
1200 SW FIRST AVENUE  
PORTLAND OR 97204-9828



Continued from front...

**SECTION 3: ELIGIBILITY**

I am eligible to serve as a Juror as I am a U.S. Citizen **and** a resident of Multnomah County **and** I am over 18 years of age **and** I have not served on a Federal or Circuit Court Jury in the last two years.

**SECTION 4: DECLARATION**

I declare that the responses in each section completed are true to the best of my knowledge and I acknowledge that if I knowingly have made a false statement of a material fact that I may be punished by a fine or imprisonment or both.

\_\_\_\_\_  
Signature of Person Summoned

\_\_\_\_\_  
Date Signed



**PLEASE BRING THIS FORM WITH YOU TO YOUR JUROR SERVICE.**

Name: [REDACTED]  
Your report date is: Monday, December 05, 2022  
Juror Number: 1  
Pool: 12/5/2022-R



Service Number: 1137-JAFVE

CIRCUIT COURT OF THE STATE OF OREGON  
FOR MULTNOMAH COUNTY  
1200 SW FIRST AVENUE  
PORTLAND, OR 97204



November 7, 2022

Juror Number: 1  
Pool: 12/5/2022-R



Service Number: 1137-JAFVE

00001  
[REDACTED]

**JURY SUMMONS**  
**BY ORDER OF THE PRESIDING JUDGE**

GREETINGS:

You are hereby summoned to serve as a juror in the Circuit Court of the State of Oregon for Multnomah County. **Your jury service will be at the Central County Courthouse. Jury duty is for two days. If you are selected for a trial that lasts longer than two days, then your service will be for the duration of that trial unless you are excused by the Judge.**

Your Jury Service begins on: **MONDAY, DECEMBER 05, 2022**

Please fill out the **Online Jury Response Form** upon receipt of this summons at:  
[www.courts.oregon.gov/courts/multnomah/jury](http://www.courts.oregon.gov/courts/multnomah/jury) using your juror service number **1137-JAFVE**.

Please check the **Jury Schedule** section on the Court's web page or call 971-274-0575 after 5:00pm, the day before your service begins to see if you need to report.

**\*\*Please bring your summons and compensation form with you when you report for jury service\*\***

If you have any difficulty responding online, you may fill out the postcard included with this summons and mail it back using the prepaid postage. **Only mail the postcard if you cannot respond online.**

**Reporting time and place:** You are to report at **7:40 AM** to the Jury Assembly Room - 03204, Multnomah County Central Courthouse, 1200 SW First Avenue, Portland, Oregon on the above date. You must report no later than **8:00 AM**. You will receive further instructions at that time.

**Responsibility to Respond to this Summons:** Each eligible person has an obligation to serve as a juror to protect the right of every person to a trial by jury. The right to a trial by jury has meaning only if you and others serve as jurors. Under law, a person is required to respond to this Circuit Court summons by completing the eligibility response questions, either online or by paper mail, and if eligible, by serving as summoned, deferring service to a future date, or being excused.

Please scan this **QR Code** to connect directly to the Online Juror Response Form:



JUROR INFORMATION SHEET

- 1. Please read this information and then respond online at www.courts.oregon.gov/courts/multnomah/jury. Please fill out the online juror response form (or mail attached postcard) as soon as possible.
2. Telephone, Fax, Mailing Address, and Email Address: You may send any mail regarding this summons to the following address: Multnomah County Central Courthouse, Jury Assembly Room #03204, 1200 SW First Avenue, Portland, Oregon 97204.
3. Persons with Disabilities: The Court will provide ADA accommodations upon request for jurors with disabilities.
4. Employer Prohibited Conduct: The law states that an employer shall not discharge or threaten to discharge, intimidate, or coerce an employee by reason of the employee's service as a juror.
5. Duration of Service: Your service is for two days.
6. Delaying Service: You may request for your jury service to be deferred to start no later than one year from your original service date.
7. Getting Excused from Service - Mandatory Standards to be Excused: If you are age 70 or above on the date of jury service, or if you are breastfeeding a child, you can request to be excused.
8. Getting Excused from Service - Discretionary Standards to be Excused: The Court may excuse you from jury service if (a) this jury service causes you, your family, or your employer undue hardship or extreme inconvenience or (b) you are the sole caregiver for a child or dependent.
9. How to Request to Be Excused Based on Discretionary Standards: You may make the request via the online jury response form, phone, fax, mail, or email.
10. Response deadline for Deferral/Excusal: If you are requesting an excusal or deferment of your jury service, the Court must receive your request at least three business days prior to the service date.
11. Parking Facilities: The Court does not validate or reimburse for parking.
12. Juror Pay: Compensation is set by the Oregon Legislature.
13. Hazardous Weather: If there are hazardous weather conditions on the day you are to report for jury service check our webpage www.courts.oregon.gov/courts/multnomah/jury or call 971-274-0575.

Complete this pre-paid postcard and mail or respond Online (Please do not do both).

Email: \_\_\_\_\_

Service Number: 1137-JAFVE



12/5/2022-R

Phone Number: \_\_\_\_\_

- I will be attending Jury Duty on: MONDAY, DECEMBER 05, 2022.
I require an American Sign Language interpreter or Real Time Captioning.
The Juror can serve on all case types: Yes No (See Section 1 Below)
I request to be excused based on: Over 70 or Breastfeeding.
I am not Eligible to serve as a juror because:
I am not a U.S. Citizen I am under the age of 18
I am not a resident of Multnomah County.
I have served on a Federal or Circuit Court jury in the last two years.
Request Hardship or Defer my Jury Duty to month of:
Reason for Hardship or Deferment:
I declare that all of the above information is true and correct to the best of my knowledge.
Signature: \_\_\_\_\_

Please Bring this Compensation Form with You to Jury Service

SECTION 1: PRIOR CONVICTIONS MAY AFFECT ELIGIBILITY FOR CRIMINAL PROCEEDINGS ONLY!

Qualifying crimes include a conviction of a felony, or having served a felony sentence within the last 15 years; or a conviction of a misdemeanor involving violence or dishonesty, or served a misdemeanor sentence based on a charge involving violence or dishonesty within the last 5 years.

Has the juror been sentenced to a qualifying felony or misdemeanor crime?

The answer will determine what type of trial a juror can serve on. If you have a qualifying conviction please check the "No" box to the question on the postcard and/or below, "Can the Juror serve on all case types?". Otherwise mark "Yes".

Can the Juror serve on all case types? Yes No

SECTION 2: (See enclosed juror information sheet regarding these options)

Juror Compensation (Information sheet item 12):

- 1. My employer pays me a wage or salary while I am on jury service. As required by law, I must waive the daily fee for service, but I wish to be reimbursed for my mileage or public transit fare.
2. My employer pays me a wage or salary while I am on jury service. As required by law, I must waive the daily fee for service and I also waive my mileage or public transit reimbursement.
3. My employer pays me a wage or salary while I am on jury service. An employment agreement permits me to retain my juror compensation in addition to this wage or salary. Waive mileage.
4. My employer pays me a wage or salary while I am on jury service on the condition that I turn over my daily fee for service to my employer, but I wish to be reimbursed for my mileage or public transit fare.
5. My employer pays me a wage or salary while I am on jury service on the condition that I turn over my daily fee for service to my employer and I will waive my mileage or public transit reimbursement.
6. I will retain my juror compensation and travel expense as none of the above conditions apply to me.
7. I agree to waive my daily juror fee(s) and/or my travel reimbursement for my jury service in Multnomah County. Waived funds go to the Oregon Judiciary Departments "Juror Improvement" account.
I will take TriMet.
My mileage round trip is \_\_\_\_\_ miles by the shortest practicable route.

Continued on back ->

**PENNSYLVANIA**

**JUROR INFORMATION QUESTIONNAIRE  
CONFIDENTIAL; NOT PUBLIC RECORD**

|  |  |  |
|--|--|--|
| NAME: LAST   | FIRST  | MIDDLE INITIAL   |
| CITY/TOWNSHIP  | COMMUNITIES IN WHICH YOU RESIDED OVER THE PAST 10 YEARS:   |  |
| MARITAL STATUS: MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/> | SEPARATED <input type="checkbox"/>   | DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> |
| OCCUPATION   | OCCUPATION(S) PAST 10 YEARS  |  |
| OCCUPATION OF SPOUSE/ OTHER  | PAST 10 YEARS OCCUPATION OF SPOUSE/OTHER   |  |
| NUMBER OF CHILDREN   | RACE: <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> HISPANIC <input type="checkbox"/> OTHER |  |
| LEVEL OF EDUCATION YOURS   | SPOUSE/OTHER   | CHILDREN   |

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | <b>YES</b>               | <b>NO</b>                |
| 1. Have you ever served as a juror before? If so, were you ever on a hung jury?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you have any religious, moral, or ethical beliefs that would prevent you from sitting in judgment in a criminal case and rendering a fair verdict?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you have any physical or psychological disability that might interfere with or prevent you from serving as a juror?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you or anyone close to you ever been the victim of a crime?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you or anyone close to you ever been charged with or arrested for a crime, other than a traffic violation?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you or anyone close to you ever been an eyewitness to a crime, whether or not it ever came to court?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you or anyone close to you ever worked in law enforcement or the justice system? This includes police, prosecutors, attorneys, detectives, security or prison guards, and court related agencies.  | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Would you be more likely to believe the testimony of a police officer or any other law enforcement officer because of his or her job?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Would you be less likely to believe the testimony of a police officer or other law enforcement officer because of his or her job?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Would you have any problem following the court's instruction that the defendant in a criminal case is presumed to be innocent unless and until proven guilty beyond a reasonable doubt?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Would you have any problem following the court's instruction that the defendant in a criminal case does not have to take the stand or present evidence, and it cannot be held against the defendant if he or she elects to remain silent or present no evidence? | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Would you have any problem following the court's instruction in a criminal case that just because someone is arrested, it does not mean that the person is guilty of anything?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. In general, would you have any problem following and applying the judge's instruction on the law?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Would you have any problem during jury deliberations in a criminal case discussing the case fully but still making up your own mind?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are you presently taking any medication that might interfere with or prevent you from serving as a juror?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is there any other reason you could not be a fair juror in a criminal case?  | <input type="checkbox"/> | <input type="checkbox"/> |

I hereby certify that the answers on this form are true and correct. I understand that false answers provided herein subject me to penalties under 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities. SIGNATURE

**RHODE ISLAND**

**59**

**Statewide Juror Qualification Questionnaire**



STATE OF RHODE ISLAND  
SUPERIOR COURT  
OFFICE OF JURY COMMISSIONER  
Licht Judicial Complex  
250 Benefit Street Providence, RI 02903  
Tel: (401) 222-3245

Service Number:

**JUROR QUALIFICATION QUESTIONNAIRE**  
\* Mandatory fields that must be completed.

**Prospective Juror Information\***

Please verify that the following information is correct. If not, please make any necessary changes next to the information.

**Contact Information\***

Preferred Contact Method - Please add your contact information so that we may send you updates. Please fill in all contact methods that apply. You must fill in at least one (1) contact method. Please check your preferred method of contact.

|                |  |                          |
|----------------|--|--------------------------|
| Cell Telephone |  | <input type="checkbox"/> |
| Home Telephone |  | <input type="checkbox"/> |

Would you prefer to be contacted by email or text?

|               |  |
|---------------|--|
| Email Address |  |
| Text Number   |  |

**Questionnaire**

The information you provide on this questionnaire will be used only by the Office of the Jury Commissioner and the court to determine your eligibility for jury service and to enable the court to contact you in the future. Once the questionnaire is completed, the information will not be publicly available except by order of the court.

**Question 1\* - Citizenship.** Are you a citizen of the United States?

Yes  No 

|                           |  |
|---------------------------|--|
| Alien Registration Number |  |
|---------------------------|--|

**Question 2\* - English Language.** As to the English language, can you:

|  |  |  |  |
|--|--|--|--|
| A. Read?   | B. Write?  | C. Speak?  | D. Understand  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |



**Question 3\* - Gender.**

Female  Male

**Question 4\* - Employment.** What is your current employment status?

Employed  Retired  Student  Unemployed

|                       |  |           |  |
|-----------------------|--|-----------|--|
| Occupation            |  |           |  |
| Employer Name         |  |           |  |
| Employer Address      |  |           |  |
| Work Telephone Number |  | Extension |  |

**Question 5\* - Education.** Please Select the number the last grade completed.

Grade School (1 - 8)  High School/Vocational/Trade (9 - 12)  
 College (13-16)  Graduate (16+)

**Question 6\* - Conviction of a Crime.** Have you ever been convicted of, pled guilty, or pled nolo contendere to a state or federal crime for which punishment could have been more than one (1) year in prison or more than a \$500 fine?

Yes  No

Has the entire sentence been completed including any suspended portions, probation, and parole?

Yes  No

**Question 7\* - Health.** Do you have any health conditions which would prevent you from serving on a jury?

Yes  No

If yes, please enter the conditions below.

|  |
|--|
|  |
|--|

**Question 8\* - Accommodations.** Do you require accommodations for a disability that would allow you to serve as a juror?

Yes  No

If yes, please list the accommodation, i.e. sign language, assistive listening device, or reader.

|  |
|--|
|  |
|--|

**Question 9\* - Excusal.** Do you request to be excused from jury duty on the grounds that serving would cause you actual economic or domestic hardship?

Yes  No

If yes, please describe the hardship.

|  |
|--|
|  |
|--|

**Question 10\* - Prior Jury Service.** Have you served on any grand or petit jury in the past three (3) years?

Yes  No

|               | Date Served |
|---------------|-------------|
| Federal Court |             |
| State Court   |             |

**Question 11 - Claim of Exemption.**

Do you wish to claim an exemption from serving as a juror? If yes, please select the category which qualifies you for an exemption.

|  |   |  |  |
|--|---|--|--|
|  | The members of Congress from the State of Rhode Island  |  | Sheriff  |
|  | The general officers of Rhode Island  |  | Deputy Sheriff   |
|  | The members and officers of the General Assembly during their tenure of office irrespective of whether the General Assembly is in session or not. |  | Member of any paid police force of Rhode Island or any city or town. |
|  | The jury commissioner and assistants.   |  | Marshal  |
|  | The justices of the Rhode Island and United States courts   |  | Deputy Marshal   |
|  | Clerks of the Rhode Island and United States courts.  |  | Correctional Officer   |
|  | Members of any paid fire department of any city or town.  |  | Probation and Parole Officer   |
|  | Members of the armed services on active duty.   |  | Practicing attorney-at-law   |

Was this questionnaire completed by someone other than the prospective juror?

Yes

|                  |  |
|------------------|--|
| Respondent Name* |  |
| Address*         |  |
| Reason*          |  |

No

By typing my name below, I hereby acknowledge that I have answered all the questions truthfully and to the best of my knowledge and belief. By typing my name, I am signing this questionnaire electronically and demonstrating my intent to use my electronic signature as an original signature.

|                                 |  |
|---------------------------------|--|
| Signature of Prospective Juror* |  |
| Date*                           |  |

**SOUTH CAROLINA**

**60**

**Statewide Jury Summons with Juror Information  
Questionnaire**

**STATE OF SOUTH CAROLINA**

**JUROR SUMMONS FOR CIRCUIT COURT**

|                 |                                   |                     |
|-----------------|-----------------------------------|---------------------|
| COUNTY OF _____ | FOR TERM BEGINNING WEEK OF: _____ | JUROR NUMBER: _____ |
|-----------------|-----------------------------------|---------------------|

You are hereby summoned to appear at \_\_\_\_\_ on \_\_\_\_\_, at \_\_\_\_\_ to answer this summons to serve as a (check applicable box)  petit juror  grand juror for the Court of Common Pleas and General Sessions. Failure to appear at the address above at the specified time may subject you to penalties as prescribed by law.

CLERK OF COURT, \_\_\_\_\_ Phone \_\_\_\_\_

|                                 |  |
|---------------------------------|--|
| NAME AND ADDRESS OF JUROR _____ | <b>IMPORTANT INFORMATION AND INSTRUCTIONS</b><br>Fill in the requested information in the "Juror Information Section" and the appropriate contact information below. After reading all of the conditions listed in the "Juror Response Section," mark any condition that applies to you. Separate the top and bottom portions of this page at the line indicated below and <b>WITHIN THREE DAYS OF RECEIPT</b> return the bottom portion of the form using the self-addressed envelope provided. |
|---------------------------------|--|

**NOTE: PERSONS FAILING TO RETURN THESE FORMS AS REQUESTED MAY BE SUBJECT TO CHARGES OF CONTEMPT OF COURT.**

Separate this top portion from bottom portion at the dotted line. Retain this top portion for your reference.

Return this bottom portion as instructed using the self-addressed envelope provided.

| <b>JUROR INFORMATION SECTION</b><br>(PLEASE PRINT OR TYPE CLEARLY.)  |                                  |  |                      | FOR TERM BEGINNING WEEK OF:      | JUROR NUMBER:                   |  |
|--|----------------------------------|--|----------------------|----------------------------------|---------------------------------|--|
| CITY, COUNTY, STATE OF BIRTH _____   | AGE _____                        | YEAR OF BIRTH _____  | # OF CHILDREN _____  | MARRIED <input type="checkbox"/> | SINGLE <input type="checkbox"/> | WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> |
| YOUR OCCUPATION _____  | PRESENT OR FORMER EMPLOYER _____ |  |                      |                                  |                                 | YEARS _____  |
| LEVEL OF FORMAL EDUCATION COMPLETED _____  |                                  |  | NAME OF SPOUSE _____ |                                  |                                 |  |
| SPOUSE'S OCCUPATION _____  |                                  | SPOUSE'S PRESENT OR FORMER EMPLOYER _____  |                      |                                  |                                 | YEARS _____  |
| HAVE YOU EVER SERVED ON A<br><input type="checkbox"/> CIVIL JURY, OR <input type="checkbox"/> CRIMINAL JURY?<br>IF SO, WHEN? _____                       |                                  | HAVE YOU EVER BEEN A PARTY TO A CIVIL LAWSUIT? <input type="checkbox"/> YES <input type="checkbox"/> NO                                |                      |                                  |                                 |  |
|  |                                  | HAVE YOU EVER BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC OFFENSE)? <input type="checkbox"/> YES <input type="checkbox"/> NO |                      |                                  |                                 |  |
| <b>NAME AND/OR ADDRESS CORRECTION: If the information below is incorrect, please write in the correct information in the space provided to the left.</b> |                                  |  |                      |                                  |                                 |  |
|  |                                  |  |                      |                                  |                                 |  |

**INFORMATION BELOW WILL BE MADE AVAILABLE ONLY TO OFFICERS OF THE COURT.**

|               |                        |                         |                         |                      |
|---------------|------------------------|-------------------------|-------------------------|----------------------|
| PHONE # _____ | BUSINESS PHONE # _____ | ALTERNATE PHONE # _____ | EMERGENCY PHONE # _____ | E-MAIL ADDRESS _____ |
|---------------|------------------------|-------------------------|-------------------------|----------------------|

|  |  |
|--|--|
| <b>JUROR RESPONSE SECTION INSTRUCTIONS</b> | Retain the top portion of this form for your reference and return the bottom portion of the form along with any required affidavits or written statements in the self-addressed envelope provided.<br><b>NOTE: Unless the clerk of court otherwise notifies you, you must report for jury duty as requested.</b> |
|--|--|

|  |  |
|--|--|
| <p style="text-align: center;"><b><u>DISQUALIFICATIONS</u></b></p> <p><input type="checkbox"/> I am not a U.S. citizen.</p> <p><input type="checkbox"/> I am not a resident of this county. (Note correct address above.)</p> <p><input type="checkbox"/> I cannot read, write, speak, or understand the English language.<br/>Translator's name and telephone #: _____</p> <p><input type="checkbox"/> I have less than a sixth grade education or its equivalent.</p> <p><input type="checkbox"/> I have a mental or physical condition that prevents me from serving as a juror. (Doctor's statement required)</p> <p><input type="checkbox"/> I have been convicted in a state or federal court of a crime that carries a sentence of more than one year of imprisonment and I have not been pardoned or given amnesty for that conviction. List offenses, when and where convicted: _____</p> <p><input type="checkbox"/> I am a clerk of court, deputy clerk of court, constable, sheriff, commissioned law enforcement officer, probate judge, county commissioner, magistrate, or county officer, or I am employed within the walls of a courthouse. Occupation: _____</p> <p><input type="checkbox"/> I have served on a circuit court jury within this calendar year.<br/>Date of Service: _____ County: _____</p> | <p style="text-align: center;"><b><u>EXEMPTIONS</u></b></p> <p><input type="checkbox"/> I am 65 years of age or older and wish to be excused. (If you do not wish to serve on a jury, you may <b>telephone</b> the clerk of court to be excused. Unless you are excused by the clerk of court prior to the term for which you are summoned, you must report for jury duty.)</p> <p><input type="checkbox"/> I am the primary caretaker of a disabled person or a person age 65 or older who cannot care for himself.***</p> <p><input type="checkbox"/> I have legal custody and duty of care of a child under the age of seven and I cannot provide adequate childcare while serving as a juror.***</p> <p><input type="checkbox"/> I am a guard, keeper, employee, or other officer at a state penitentiary.</p> <p><input type="checkbox"/> I have served on a circuit court jury during the previous three calendar years, or I have served on a grand jury during the previous five calendar years. Date of Service: _____ County: _____<br/>Jury Type: <input type="checkbox"/> Circuit Court <input type="checkbox"/> Grand Jury</p> <p><input type="checkbox"/> I am a student or a school employee and wish to be transferred to a later date that will not conflict with my school term.<br/>Date Available for Service: _____<br/><b>[When you return this form, you must also send evidence of school enrollment or employment.]</b></p> <p style="color: red; font-size: small;">***An affidavit (notarized statement) must be returned with this form attesting to the above statements.</p> |
|--|--|

I HAVE READ THE CONDITIONS FOR DISQUALIFICATION AND EXEMPTION ABOVE AND NONE OF THE CONDITIONS LISTED APPLY TO ME.

**NOTE: THE FURNISHING OF FALSE OR MISLEADING INFORMATION OR THE FAILURE TO FURNISH INFORMATION TO THE COURT MAY SUBJECT YOU TO PENALTIES AS PRESCRIBED BY LAW.**

YOUR SIGNATURE \_\_\_\_\_

**SOUTH DAKOTA**

**61**

**Statewide Juror Questionnaire**

## <<CountyName>> County Juror Questionnaire

<<JurorNumber>>  
 <<Firstname>> <<MiddleName>> <<LastName>>  
 <<Address>>  
 <<Address2>>  
 <<City>> <<State>> <<ZipCode>>

**Website information**  
 ujsjurors.sd.gov  
 Login: <<JurorNumber>>  
 Security Code: <<SecurityCode>>

Is your address correct?  Yes  No If No, please make corrections above.

**PLEASE NOTE: Please read this form carefully. Fill in all the information requested. The Juror Questionnaire and Confidential Juror Qualification Form must be completed and returned in the enclosed envelope or submitted on-line at [www.sdjurors.com](http://www.sdjurors.com), using the Login and Password above, no later than ten (10) working days from the date you receive this.**

| Juror Age:<br>How many miles one way from your home to the county courthouse?<br>How long have you lived in this county?<br>What is your present occupation?<br>Current Employer:<br>Date Started:<br>Prior Employer:<br>If retired, last employer:<br>Education: <input type="radio"/> Elementary<br><input type="radio"/> High School<br><input type="radio"/> Technical School<br><input type="radio"/> College<br><input type="radio"/> Graduate Degree<br>Marital Status: <input type="radio"/> Married<br><input type="radio"/> Single<br><input type="radio"/> Divorced<br><input type="radio"/> Widow/Widower<br><input type="radio"/> Separated<br>If married or widowed, Name of Spouse:<br>Spouse's occupation and employer:<br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">List members of your family or household</th> <th colspan="2" style="text-align: center;">Lives with you</th> </tr> <tr> <th style="text-align: left;">Name                      Relationship                      Age</th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td> </td><td style="text-align: center;"><input type="radio"/></td><td style="text-align: center;"><input type="radio"/></td></tr> </tbody> </table> | List members of your family or household   | Lives with you        |  | Name                      Relationship                      Age | YES | NO |  | <input type="radio"/> | <input type="radio"/> |  | <input type="radio"/> | <input type="radio"/> |  | <input type="radio"/> | <input type="radio"/> |  | <input type="radio"/> | <input type="radio"/> |  | <input type="radio"/> | <input type="radio"/> |  | <input type="radio"/> | <input type="radio"/> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">                             Have you ever brought a lawsuit or been sued?<br/>                             If yes, what did the lawsuit involve?<br/> <input type="radio"/> Personal injury<br/> <input type="radio"/> Contract<br/> <input type="radio"/> Divorce<br/> <input type="radio"/> Other _____                         </td> <td style="width: 20%; text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Has any member of your immediate family brought a lawsuit or been sued?<br/>                             If yes, what did the lawsuit involve?<br/> <input type="radio"/> Personal injury<br/> <input type="radio"/> Contract<br/> <input type="radio"/> Divorce<br/> <input type="radio"/> Other _____                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Have you been convicted of a crime, other than a traffic violation?                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Has an immediate family member been convicted of a crime, other than a traffic violation?                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Are you related to, or a close friend of, any law enforcement officer?                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Have you ever been a victim of a crime?<br/>                             If yes, did it involve?<br/> <input type="radio"/> Assault<br/> <input type="radio"/> Theft<br/> <input type="radio"/> Damage to property<br/> <input type="radio"/> Other _____                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Has a family member been a victim of a crime?<br/>                             If yes, did it involve?<br/> <input type="radio"/> Assault<br/> <input type="radio"/> Theft<br/> <input type="radio"/> Damage to property<br/> <input type="radio"/> Other _____                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Have you ever been a juror?<br/>                             If yes, was it within two years?                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/><br/> <input type="radio"/> <input type="radio"/> </td> </tr> <tr> <td>                             Have you ever been a witness in a case?<br/>                             If yes, did the case involve?<br/> <input type="radio"/> Criminal charges<br/> <input type="radio"/> Personal injury<br/> <input type="radio"/> Property damage<br/> <input type="radio"/> Contract dispute<br/> <input type="radio"/> Other _____                         </td> <td style="text-align: center;">                             YES NO<br/> <input type="radio"/> <input type="radio"/> </td> </tr> </table> | Have you ever brought a lawsuit or been sued?<br>If yes, what did the lawsuit involve?<br><input type="radio"/> Personal injury<br><input type="radio"/> Contract<br><input type="radio"/> Divorce<br><input type="radio"/> Other _____ | YES NO<br><input type="radio"/> <input type="radio"/> | Has any member of your immediate family brought a lawsuit or been sued?<br>If yes, what did the lawsuit involve?<br><input type="radio"/> Personal injury<br><input type="radio"/> Contract<br><input type="radio"/> Divorce<br><input type="radio"/> Other _____ | YES NO<br><input type="radio"/> <input type="radio"/> | Have you been convicted of a crime, other than a traffic violation? | YES NO<br><input type="radio"/> <input type="radio"/> | Has an immediate family member been convicted of a crime, other than a traffic violation? | YES NO<br><input type="radio"/> <input type="radio"/> | Are you related to, or a close friend of, any law enforcement officer? | YES NO<br><input type="radio"/> <input type="radio"/> | Have you ever been a victim of a crime?<br>If yes, did it involve?<br><input type="radio"/> Assault<br><input type="radio"/> Theft<br><input type="radio"/> Damage to property<br><input type="radio"/> Other _____ | YES NO<br><input type="radio"/> <input type="radio"/> | Has a family member been a victim of a crime?<br>If yes, did it involve?<br><input type="radio"/> Assault<br><input type="radio"/> Theft<br><input type="radio"/> Damage to property<br><input type="radio"/> Other _____ | YES NO<br><input type="radio"/> <input type="radio"/> | Have you ever been a juror?<br>If yes, was it within two years? | YES NO<br><input type="radio"/> <input type="radio"/><br><input type="radio"/> <input type="radio"/> | Have you ever been a witness in a case?<br>If yes, did the case involve?<br><input type="radio"/> Criminal charges<br><input type="radio"/> Personal injury<br><input type="radio"/> Property damage<br><input type="radio"/> Contract dispute<br><input type="radio"/> Other _____ | YES NO<br><input type="radio"/> <input type="radio"/> |
|--|--|-----------------------|--|---|-----|----|--|-----------------------|-----------------------|--|-----------------------|-----------------------|--|-----------------------|-----------------------|--|-----------------------|-----------------------|--|-----------------------|-----------------------|--|-----------------------|-----------------------|--|---|---|---|---|---|---|---|---|--|---|---|---|---|---|---|--|---|---|
| List members of your family or household   | Lives with you   |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Name                      Relationship                      Age  | YES  | NO                    |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
|  | <input type="radio"/>  | <input type="radio"/> |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you ever brought a lawsuit or been sued?<br>If yes, what did the lawsuit involve?<br><input type="radio"/> Personal injury<br><input type="radio"/> Contract<br><input type="radio"/> Divorce<br><input type="radio"/> Other _____  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Has any member of your immediate family brought a lawsuit or been sued?<br>If yes, what did the lawsuit involve?<br><input type="radio"/> Personal injury<br><input type="radio"/> Contract<br><input type="radio"/> Divorce<br><input type="radio"/> Other _____  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you been convicted of a crime, other than a traffic violation?  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Has an immediate family member been convicted of a crime, other than a traffic violation?  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Are you related to, or a close friend of, any law enforcement officer?   | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you ever been a victim of a crime?<br>If yes, did it involve?<br><input type="radio"/> Assault<br><input type="radio"/> Theft<br><input type="radio"/> Damage to property<br><input type="radio"/> Other _____  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Has a family member been a victim of a crime?<br>If yes, did it involve?<br><input type="radio"/> Assault<br><input type="radio"/> Theft<br><input type="radio"/> Damage to property<br><input type="radio"/> Other _____  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you ever been a juror?<br>If yes, was it within two years?  | YES NO<br><input type="radio"/> <input type="radio"/><br><input type="radio"/> <input type="radio"/>   |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you ever been a witness in a case?<br>If yes, did the case involve?<br><input type="radio"/> Criminal charges<br><input type="radio"/> Personal injury<br><input type="radio"/> Property damage<br><input type="radio"/> Contract dispute<br><input type="radio"/> Other _____  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Have you been in an auto accident?<br>If yes, were you injured?<br>Were you the driver?<br>Was anyone else injured?  | YES NO<br><input type="radio"/> <input type="radio"/><br><input type="radio"/> <input type="radio"/><br><input type="radio"/> <input type="radio"/><br><input type="radio"/> <input type="radio"/> |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |
| Has any member of your family or a close friend been in an auto accident?  | YES NO<br><input type="radio"/> <input type="radio"/>  |                       |  |   |     |    |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |                       |                       |  |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |  |   |   |





<<JurorNumber>>  
<<Firstname>> <<MiddleName>> <<LastName>>  
<<Address>>  
<<Address2>>  
<<City>> <<State>> <<ZipCode>>

**PLEASE NOTE: Please read this form carefully. Fill in all the information requested. The Juror Questionnaire and Confidential Juror Qualification Form must be completed and returned in the enclosed envelope or submitted on-line at [www.sdjurors.com](http://www.sdjurors.com), using the Login and Password above, no later than ten (10) working days from the date you receive this.**

## **CONFIDENTIAL JUROR QUALIFICATION FORM**

Some persons may be exempt or excused from jury service. Please read the following, check the appropriate box that applies to you, sign your name and date the form, and complete the remaining information.

**NOTE:** *you will only be excused upon receipt of your written request and approval by the court. You will be notified whether your request for excusal is approved or denied*

**Qualifying Age Reason:** Effective July 1, 2009, any person eighty years of age or older may request to be excused from jury duty. The judge shall give substantial weight to the person's request to be relieved from jury duty, balancing the request with the need to impanel a jury.

**Medical Reasons:** If you are ill, disabled or have a hearing or sight problem that will prevent your service, check this box and have your physician mail a letter of explanation to the Clerk of Courts. Please sign the line below.  
**NOTE:** *you will only be excused upon receipt of your physician's letter and approval by the Court. You will be notified whether your request for excusal is approved or denied.*

**Religious Reason:** If jury service conflicts with the religious beliefs of your church or religious organization, check this box and have your religious leader mail a letter of explanation to the Clerk of Courts. Please sign the line below.  
**NOTE:** *you will only be excused upon receipt of your religious leader's letter and approval by the Court. You will be notified whether your request for excusal is approved or denied.*

**New Parents and Breastfeeding Mothers:** If you are a parent of a child expected to be born during or immediately prior to scheduled jury duty; a breastfeeding mother of a child younger than one year; or the parent of a child less than six weeks old and you are requesting to be excused from jury duty, check this box. You must submit a written request to the Clerk of Courts within ten days of receiving the summons for jury duty. Please sign the line below  
**NOTE:** *you will only be excused upon receipt of your written request and approval by the court. You will be notified whether your request for excusal is approved or denied.*

Penitentiary employee

Convicted felon not restored to civil rights

Unable to read, write or understand the English language

Not a U.S. citizen

No longer living in county

Served as Juror in past 2 years

**No Exemption or Reason applies.**

**I declare and affirm under the penalties of perjury that this information has been examined by me, and to the best of my knowledge and belief, is in all things true and correct.**

\_\_\_\_\_  
Juror Signature (Required)

\_\_\_\_\_  
Date

|                   |                        |
|-------------------|------------------------|
| Juror Home Phone: | Juror Preferred Phone: |
| Juror Work Phone: | Juror E-mail           |
| Juror Cell Phone: | Juror Date of Birth:   |

\*By listing a Cell Phone Number or E-mail address, you authorize the Unified Judicial System (UJS) to notify you of changes in court events that you are called to serve. You will be responsible for any fees applied by your service provider.

|  |                         |
|--|-------------------------|
| In case of Emergency contact:<br>Name: _____<br>Phone: _____ | Special Accommodations: |
|--|-------------------------|

**FOR COURT USE ONLY**

Juror's request is hereby:  Approved; or  Denied.

---

Judge's Signature

**TENNESSEE**

**62**

**Statewide Juror Qualification Form**

## JURY SUMMONS

You are hereby notified that you have been selected for jury service in the trial courts of [insert county] County, Tennessee. You must report to [insert room number or name] at the courthouse in [insert city], Tennessee, on [insert report date] at [insert report time]. **Unless you are notified by the court that you are not required to appear, you are subject to being held in contempt of court and being fined up to five hundred dollars (\$500.00) plus court costs if you fail to appear.**



If, in order for you to report for jury service or serve as a juror, you require assistance or modification due to a qualified disability, please contact the ADA Coordinator, [insert name of ADA coordinator], at [insert phone number].

---

### JUROR QUALIFICATION FORM

**IF YOU ARE INELIGIBLE TO SERVE, WISH TO BE EXCUSED, OR WISH TO POSTPONE YOUR SERVICE, RETURN THIS PORTION TO THE COURT BY MAIL WITHIN 10 DAYS**

**NAME AND ADDRESS:** [insert juror's name and address]

**PHONE** [To be provided by juror]: \_\_\_\_\_

**ELIGIBILITY:** A person is only eligible for jury service if he or she is at least 18 years of age, is a citizen of the United States, has been a resident of [insert county] County for at least 12 months, has not served as a juror during the previous twenty-four (24) months, and has not been convicted of perjury, subornation of perjury, a felony, or any infamous offense. If you believe you are ineligible to serve, list the reason(s) below. If your ineligibility is due to a criminal conviction, list the name(s) of the offense(s) of which you were convicted: \_\_\_\_\_

**POSTPONEMENT OF SERVICE:** Jurors may request a temporary postponement of their jury service. If you wish to request a postponement, complete the following: 1. Have you previously been granted a postponement of jury service?  Yes  No; 2. List a period of [insert the required time period] within the next 12 months when you will be available to complete your service: \_\_\_\_\_; 3. If you have previously been granted a postponement, list the extraordinary event, such as a death in your immediate family, sudden grave illness, natural disaster, or national emergency which you believe qualifies you for another postponement: \_\_\_\_\_

**EXCUSE FROM SERVICE:** Jurors will only be excused if serving will cause an **undue or extreme physical or financial hardship**. Such a hardship may be present if the juror has a mental or physical condition which causes the juror to be incapable of performing jury service, or if the juror would: (a) be required to abandon a person under such juror's personal care or supervision due to the impossibility of obtaining an appropriate substitute caregiver during the period of participation in the jury pool or on the jury; (b) incur costs that would have a substantial adverse impact on the payment of the juror's necessary daily living expenses or on those for whom such juror provides the principal means of support; (c) suffer physical hardship that would result in illness or disease; or (d) be deprived of compensation due to the fact that the prospective juror works out-of-state and the out-of-state employer is unwilling to compensate the juror, or that the prospective juror is employed by an employer who is not required to compensate jurors and declines to do so voluntarily. An undue or extreme physical or financial hardship does not exist solely based on the fact that a juror will be required to be absent from the juror's place of employment. **If you wish to assert such a hardship, explain the nature of the hardship and enclose an affidavit, income tax returns, medical statement from a licensed physician, proof of dependency or guardianship, or any other documentation which may be relevant to your request.** **Failure to provide satisfactory documentation may result in the denial of your request.** \_\_\_\_\_

## JURY SERVICE INFORMATION SHEET

Congratulations on being selected for jury service in [insert county] County! Your service is essential to the administration of justice, and your participation is greatly appreciated by the judges, attorneys, and parties. The constitutional right to a jury trial is critical to our judicial system, and jurors are a crucial part of the process. Serving as a juror is not only an obligation, but a right and privilege. Thank you for serving.

A judge and jury coordinator will be available to answer any questions you have concerning your service when you appear on [insert date]. However, you may also find the information below helpful. [You may also wish to insert a website and/or contact phone number/e-mail address]

**Directions to the Courthouse and Parking Information:** [insert address, driving directions, available parking locations, and information regarding parking fees]

**Length of Service:** Your term is [insert days/months] in length. You will not be required to be at the courthouse each day, but will merely call a recording [insert days/time] to see if you are needed.

**Attire:** Jurors must be dressed appropriately while in the courthouse. Although the judge will determine whether jurors' attire is appropriate, jurors should not wear shorts, short skirts, sagging pants, see-through or suggestive clothing, visible undergarments (including undershirts and tank tops), flip flops, house shoes, bandanas, headbands, hats/caps, or clothing with inappropriate or offensive advertisements or slogans.

**Prohibited Items:** Jurors may not bring drugs, alcohol, or weapons into the courthouse. If you require medication during your service, contact [insert name of ADA coordinator] at [insert contact information] *prior to the date of your appearance*.

**Permissible Items:** Jurors should listen closely when being addressed by a judge, jury coordinator, or other court personnel. However, there may be periods in which jurors are required to sit quietly and wait for the next step in the jury selection process. During those periods, jurors may read, use their computers, talk on the phone, play hand-held video games, listen to music through headphones, drink non-alcoholic beverages, or eat snacks. These items are not provided by the court, so jurors may wish to bring the items with them to the courthouse.

**Compensation by Court:** Jurors will receive [insert amount] for each day's attendance. Jurors will also be reimbursed for mileage at a rate of [insert amount or delete this sentence if inapplicable to your county].

**Employer – Compensation:** If an employer employs less than five people on a regular basis or if the juror has been employed by an employer on a temporary basis for less than six months, the employer is not required to compensate the juror during the period of jury service. All other Tennessee employers must provide a juror's usual compensation *for the time the juror actually spends serving and traveling to and from jury duty*. An employer has the discretion to deduct the amount of compensation the juror receives from the court. You may request a certificate of attendance when you report for jury duty if your employer requires such a certificate.

**Employer – Excused Absences:** An employer must excuse the juror from employment for each day the juror's service exceeds three hours if the juror shows the jury summons to the employer upon receipt of the summons. A juror who works the night shift or the hours immediately preceding the hours court is normally held should contact the jury coordinator at [insert contact information] for additional guidance.

**NOTE TO COUNTIES:** The summons and jury information sheet are provided for your convenience and may be amended to comply with your county's requirements. However, please note that each county's summons must include the items listed in T.C.A. § 22-2-306.

**TEXAS**



**63**

**Statewide Juror Questionnaire**

\_\_\_\_\_ County, Texas  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
 (Address)  
 \_\_\_\_\_  
**JURY SUMMONS NO.**

**Dear Prospective Juror:**  
 You are hereby summoned for  
 jury service as set out below:

**Time:**  
**Date:**  
**Place:**

**Forwarding Service Requested**  
**POSTMASTER**  
**PLEASE DELIVER TO:**

**THE FOLLOWING "JUROR QUESTIONNAIRE" IS MANDATED BY GOVERNMENT CODE, SECTION 62.0132.**  
*Your answers are CONFIDENTIAL. Your answers may be disclosed only to the judge, court personnel, the litigant, the litigant's attorney, and, other than juror qualification information related to the legal accusation of, indictment for, or conviction of misdemeanor theft or a felony, to the county voter registrar.*

| PLEASE TYPE OR PRINT WITH INK ONLY   |                                 | JUROR QUESTIONNAIRE  |      |   |   |
|--|---------------------------------|--|------|---|---|
| <input type="checkbox"/> Male  | <input type="checkbox"/> Female | Race (required by State Law):  | Age: | Date of Birth:  | Are you a U.S. Citizen? <input type="checkbox"/> Y <input type="checkbox"/> N<br>(Please see "Note" below.) |
| Your Name:<br>Home Address:  |                                 |  |      | <b>Please check highest level of education completed:</b><br><input type="checkbox"/> No H.S. Diploma or GED <input type="checkbox"/> GED<br><input type="checkbox"/> H.S. Diploma<br><input type="checkbox"/> 2yr College<br><input type="checkbox"/> 4yr College/University<br><input type="checkbox"/> Post-Graduate<br><input type="checkbox"/> Other _____ |   |
| Mailing Address (if different from home):  |                                 |  |      |   |   |
| Primary Phone:   | Alternate Phone:                | County of Residence:   |      |   |   |
| Your Occupation:   |                                 |  |      |   |   |
| Your Employer:   |                                 | How Long?  |      | <b>Current Marital Status:</b><br><input type="checkbox"/> Single<br><input type="checkbox"/> Married<br><input type="checkbox"/> Widowed<br><input type="checkbox"/> Divorced  |   |
| Spouse's Name:   |                                 | Spouse's Occupation:   |      |   |   |
| Spouse's Employer:   |                                 | How Long?  |      |   |   |
| Have you ever served on a civil jury? <input type="checkbox"/> Y <input type="checkbox"/> N  |                                 | Have you ever served on a criminal jury? <input type="checkbox"/> Y <input type="checkbox"/> N |      | Number of Children: _____   |   |
| <b>I CERTIFY THAT ALL ANSWERS ARE TRUE AND CORRECT.</b><br>Please sign here: _____   |                                 |  |      | Ranges of Age:<br>from ____ years to ____ years   |   |
| <b>NOTE: If you state that you are not a U.S. citizen, you will no longer be eligible to vote if you fail to provide proof of U.S. citizenship to your county voter registrar.</b> |                                 |  |      |   |   |

**Directions:** You must report for jury service unless you: (1) claim an **exemption**; (2) are **disqualified**; or (3) choose to **postpone** your service.

**To claim an Exemption:** Circle the exemption(s) that you claim. Sign the form. Mail or take the form to the \_\_\_\_\_ clerk's office. NOTE: You do not have to claim an exemption and may instead choose to serve.

**If you are Disqualified:** Circle the qualification(s) that you do not meet. Sign the form. Mail or take the form to the \_\_\_\_\_ clerk. NOTE: If you claim to be disqualified because you are not a resident of this county, you may become ineligible to vote in this county. If you state that you are not a U.S. citizen, you will no longer be eligible to vote if you fail to provide proof of U.S. citizenship to your county voter registrar.

**To Postpone your Service:** Contact the \_\_\_\_\_ clerk's office before your scheduled date of service.

**Before Reporting for Jury Service:** Please complete the juror questionnaire. Bring the questionnaire with you when you report.

**Questions or Special Accommodations:** Please contact the \_\_\_\_\_ clerk's office.

**(C l e r k)  
(C o n t a c t)  
(I n f o r m a t i o n)**

**EXEMPTIONS FROM JURY SERVICE  
(Texas Government Code, Section 62.106)**

1. You are over 70 years of age.
2. You have legal custody of a child or children younger than 12 years of age and service on the jury would require leaving the child or children without adequate supervision.
3. You are a student at a public or private high school.
4. You are enrolled and in actual attendance at an institution of higher education.
5. You are an officer or an employee of the senate, the house of representatives, or any department, commission, board, office, or other agency in the legislative branch of state government.
6. You are the primary caretaker of a person who is unable to care for himself or herself. (This exemption does not apply to you if you are a primary caretaker only in your capacity as a health care worker.)
7. You are a member of the United States military forces serving on active duty and deployed to a location away from your home station and out of your county of residence;
8. You have served as a juror in this county during the 24-month period prior to the date you are required to appear by this summons.
9. You have been summoned for jury service in this county and you have served as a petit juror in this county during the three-year period prior to the date you are required to appear by this summons.

**QUALIFICATIONS FOR JURY SERVICE  
(Texas Government Code, Section 62.102)**

To be qualified to serve as a juror you *must*:

1. be at least 18 years of age;
2. be a citizen of the United States;
3. be a resident of this state and a resident of the county in which you are to serve as a juror;
4. be qualified under the Constitution and laws to vote in the county in which you are to serve as a juror (*Note: You do not have to be registered to vote to be qualified to vote.*);
5. be of sound mind and good moral character;
6. be able to read and write;
7. not have served as a juror for six days during the preceding three months in the county court or during the preceding six months in the district court; and
8. not have been convicted of, or be under indictment or other legal accusation for, misdemeanor theft or a felony.

**I certify that I am exempt or disqualified from jury service for the reasons circled above.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

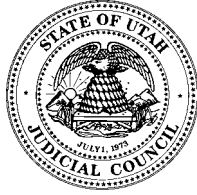
**Right to Reemployment:** An employer may not discharge, threaten to discharge, intimidate, or coerce any permanent employee because the employee serves as a juror, or for the employee's attendance or scheduled attendance in connection with the service, in any court in the United States. An employee who is discharged, threatened with discharge, intimidated, or coerced in violation of this section is entitled to return to the same employment that the employee held when summoned for jury service if the employee, as soon as practical after release from jury service, gives the employer actual notice that the employee intends to return. (Civil Practice and Remedies Code, Section 122.001).

**Failure to Answer Summons and Provision of False Information:** A person who fails to comply with this summons, or who knowingly provides false information in a request for an exemption or to be excused from jury service, is subject to a contempt action punishable by a fine of not less than \$100 nor more than \$1,000 (Government Code, Section 62.0141). Additionally, a person shall be fined not less than \$100 nor more than \$500 if the person: (1) fails to attend court in obedience to this summons without reasonable excuse; or (2) files a false claim of exemption from jury service. (Government Code, Section 62.111; *see also* Code of Criminal Procedure, Article 35.01).

**UTAH**

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**San Juan County – Juror Qualification Form**



## Administrative Office of the Courts

Chief Justice Matthew B. Durrant  
Utah Supreme Court  
Chair, Utah Judicial Council

Ron Gordon  
State Court Administrator  
Neira Siaperas  
Deputy Court Administrator

Dear Prospective Juror,

This letter is to inform you that you have been randomly selected as a prospective juror. If you meet the requirements established by law, you may be selected to serve on a jury. No special knowledge or skills are needed to be a juror, only your personal experience.

The thought of jury service may be a bit unsettling and you may be inconvenienced; however, most citizens find jury service rewarding. So that everyone has the opportunity to serve, the court draws names randomly from a list of adult citizens in the county, which is as inclusive as possible.

This letter includes a form that you are required to complete and send to the jury clerk in order to qualify for jury service. You may also complete the form online as per the instructions on the form. The clerk will try to fit jury service into your schedule. There are limits, however, and the clerk may not be able to meet your scheduling request. If you have a disability, contact the clerk prior to arriving at court to arrange for accommodations. You may ask to be excused, either permanently or for the term, but the reasons to be excused are very limited.

If you are called for jury service, you will need to arrange to take leave from work. The clerk can provide you with a letter for your employer to verify your service. (Your employer is prohibited by law from retaliating against you because of jury service.) You will also need to arrange for the care of your children and other dependents.

Courts try to be efficient but often delays occur, so please come prepared to spend time waiting. You are welcome to bring a book or work with you. Business attire is requested to reflect the importance of the proceedings. Please note that most trials last no more than two days.

In the end, you might not be called for jury service. If you do serve, however, you will be paid \$18.50 for the first day you attend court and \$49 for each subsequent day. You will also be rewarded with the pride you can take in serving your community. Thank you in advance for your public service. I hope you welcome the prospect of jury service. It is an important civic duty and an important civic right. Our justice system cannot function without you.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew B. Durrant".

Matthew B. Durrant  
Chief Justice, Utah Supreme Court



**JUROR QUALIFICATION FORM INSTRUCTIONS**  
**COMPLETE THIS FORM ONLINE AT [WWW.UTCOURTS.GOV](http://WWW.UTCOURTS.GOV)**

Dear San Juan County Resident:

Your name has been drawn at random from a list of all adult citizens of the county for jury service. Please carefully read and follow these instructions to complete your questionnaire and return it to the court. **You must complete and return the form within 10 days.**

- Complete **Parts 1 and 2** of the form
- Complete **Part 3** if you want to request scheduling accommodations. To help us meet your schedule, please keep the conflict dates to a minimum.
- Complete **Part 4** if you feel that you qualify to be excused from jury service either permanently or temporarily. *Include a **doctor's note** if your reason to be excused is medical.*
- Sign the form in **Part 5**.
- Return the form by one of the following methods:



ONLINE

1. Go to [www.utcourts.gov](http://www.utcourts.gov).
2. Click on "Jurors." Select "Qualify Online."
3. Enter Juror Number. Your Juror Number can be found on the Juror Qualification Form.
4. Enter your Birthdate and follow the instructions.



MAIL

1. Remove this page (send only Page 3 and any attachments).
2. Fold the questionnaire so the court's address appears on the outside.
3. Seal the top edge with tape. *Do not use a stamp. The court will pay the postage.*

**After completing the qualification, you do not need to do anything else unless you are summoned. If you are summoned, the summons will give you further instructions.**

The court will decide whether you meet the qualifications for jury service and whether any scheduling request—or request to be excused—is granted.

Jury service is available to all qualified individuals with disabilities. If you have a disability and require accommodation, contact the court after being summoned.

The information you provide here is private and will not be disclosed. If you are summoned as part of the "venire panel," which is a short list of potential jurors, your name will be given to the lawyers in the case. If you are selected to try a case, your name may be released to the public, unless you ask the judge to keep it private.

The court will not contact you by phone to ask for private information. If this happens, especially if the caller threatens an arrest warrant, it may be an attempt to steal identifying information. Refuse to give the information, hang up, and call the jury clerk or your local police.

If you have any questions not answered here, please call the jury clerk at 435-587-2122.



**JUROR QUALIFICATION FORM**

COMPLETE THIS FORM ONLINE AT [WWW.UTCOURTS.GOV](http://WWW.UTCOURTS.GOV)

TERM OF JURY SERVICE: FROM \_\_\_\_\_ To \_\_\_\_\_

**PART 1- IDENTIFICATION**

|  |                                |               |
|--|--------------------------------|---------------|
| Juror Name   | Juror Number                   | Date of Birth |
| Physical Address   | Mailing Address (If different) | Home Phone    |
| City State Zip   | City State Zip                 | Work Phone    |
| E-mail Address (The court will contact you through email.) |                                | Cell Phone    |

**PART 2- QUALIFICATION**

Fill in the circle under "yes" or "no" as appropriate.

| Yes                   | No                    | Qualification  |
|-----------------------|-----------------------|--|
| <input type="radio"/> | <input type="radio"/> | Have you ever been convicted of a felony that has not been expunged? If yes, please give the name of the court and the date of conviction. |
| <input type="radio"/> | <input type="radio"/> | Have you appeared for jury service in Utah within the last 24 months? If yes, please give the name of the court and the date of service.   |
| <input type="radio"/> | <input type="radio"/> | Are you 18 years of age or older?  |
| <input type="radio"/> | <input type="radio"/> | Are you a citizen of the United States?  |
| <input type="radio"/> | <input type="radio"/> | Are you a resident of San Juan County?   |
| <input type="radio"/> | <input type="radio"/> | Are you able to read, speak and understand, or communicate, in English?  |

To ensure that all people are represented on juries, please mark which of the following applies to you. Nothing disclosed will affect your selection for jury duty.

Black  White  American Indian  Hispanic  Other (specify) \_\_\_\_\_

**PART 3- SCHEDULING**

Fill in the circle as appropriate.

- I have no conflict dates.
- I have conflicts on the following dates:

| Dates | Nature of Conflict |
|-------|--------------------|
|       |                    |
|       |                    |
|       |                    |

**PART 4-REQUEST TO BE EXCUSED**

You may request to be excused from jury service for undue hardship, for public necessity, or because you are incapable of jury service. You may be excused at this time because you are a mother who breastfeeds a child. If requesting to be excused from jury service, fill in the circle next to the type of excusal being requested.

- I request that the court excuse me at this time.
- I request that the court excuse me permanently.

Please explain the reason you should be excused. If your request is for medical reasons, please attach a letter from your physician supporting the request.

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**PART 5- SIGNATURE**

Pursuant to Utah Code § 78B-18a-101, et seq., I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Sign Here ► \_\_\_\_\_ Date \_\_\_\_\_  
 Fill in circle if signed by someone other than the juror.



JURY CLERK  
SEVENTH DISTRICT COURT  
PO BOX 68  
MONTICELLO UT 84535

## JUROR QUALIFICATION FORM RESPONSE REQUIRED

IF ADDRESSEE DOES NOT LIVE AT THIS  
ADDRESS OR IS DECEASED PLEASE  
INDICATE AND RETURN TO SENDER

\_\_\_\_\_ DOES NOT LIVE HERE

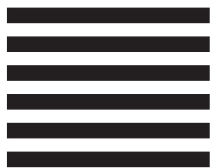
\_\_\_\_\_ DECEASED



MA4105 C  
JURY CLERK  
SEVENTH DISTRICT COURT-MONTICELLO  
PO BOX 31431  
SALT LAKE CITY UT 84131-9988

POSTAGE WILL BE PAID BY ADDRESSEE

**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 880 SALT LAKE CITY, UT



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**65**

**Salt Lake City – Juror Questionnaire**

## July: Third District Court Juror Questionnaire

### Section 1:

**You have been summoned for jury selection. Please briefly answer the questions below and submit this questionnaire as soon as possible. Be sure to complete all 7 sections, then click submit.**

**Please do not discuss this questionnaire or your answers with anyone. It is very important that you are not influenced by others and that the answers are your and yours alone. Remember that there are no "right" or "wrong" answers, only truthful answers. You are sworn to give true and complete answers to all questions. This questionnaire will not be made public.**

**Please contact the jury clerk at [slcjury@utcourts.gov](mailto:slcjury@utcourts.gov) or (801) 238-7175 if you have any questions that were not answered by Presiding Judge Mark Kouris' letter, the Court's juror information page, or the jury video.**

\* 1. First Name

\* 2. Last Name

\* 3. Juror number: (Found on your Juror Qualification Form or the email you received with the link to this questionnaire. Otherwise, please email [slcjury@utcourts.gov](mailto:slcjury@utcourts.gov) and ask for your #)

\* 4. Are you a citizen of the United States?

Yes

No

\* 5. Are you over the age of 18 years?

Yes

No

\* 6. Are you able to speak, read, and understand the English language?

Yes

No

\* 7. Have you been convicted of a felony that has not been expunged?

- Yes
- No

\* 8. What city and county do you currently live in?

\* 9. Did someone help you complete this questionnaire?

- Yes
- No

\* 10. Will you require the assistance of another person to participate in video conferencing for jury selection?

- Yes
- No

### July: Third District Court Juror Questionnaire

#### Section 2:

\* 11. Have you been fully vaccinated against Covid-19?

- Yes
- No
- Prefer not to answer

\* 12. If there is any reason related to covid-19 that makes you uncomfortable serving as a juror, please explain in 30 words or less.

### July: Third District Court Juror Questionnaire

#### Section 3:

\* 13. Are you suffering from a physical or mental disability that makes you unable to serve as a juror?

- Yes
- No

\* 14. What is your current relationship status?

- Single
- Married / Domestic Partner / Engaged
- Divorced / Separated
- Widow / Widower

\* 15. How many children do you have, and what are their ages?

\* 16. What is your occupation and where do you currently work? (if retired, provide previous occupation and employer)

\* 17. Have you ever been employed in any sort of law enforcement capacity?

- Yes
- No

\* 18. What is your spouse or partner's occupation and where do they currently work? (if retired, provide previous occupation and employer)

\* 19. Where do you go for news and information about current events? (please list specific magazines, newspapers, periodicals, and websites)

\* 20. What is the highest level of formal education you have completed?

- Less than high school
- High school diploma / GED
- Some college (but no degree)
- Associate's or technical degree
- Bachelors degree
- Graduate degree

21. If you attended college or technical training, what was your field of study?

\* 22. Please state briefly any training, education, or work you have completed in any of the following areas: law, business, engineering, health/medicine, insurance, statistics, teaching, psychology.

## July: Third District Court Juror Questionnaire

### Section 4:

\* 23. Have you ever served on a jury before?

Yes

No

If so, briefly describe: When? Type of case? Result? Were you the foreperson?

\* 24. Other than a divorce action, have you ever been a party, witness, or victim in a trial or a lawsuit?

Yes

No

If so, briefly describe: When? Type of case? Result?

\* 25. Are you related to or close friends with a law enforcement officer?

Yes

No

\* 26. Are you related to or close friends with an attorney? (civil lawyer, criminal defense lawyer, government lawyer, or prosecutor)

Yes

No

## July: Third District Court Juror Questionnaire

### Section 5:

\* 27. Have you ever had a bad experience with a prosecutor, a criminal defense attorney, or a law enforcement officer?

- Yes  
 No

\* 28. In a criminal case, the judge will instruct you that you may not give more or less weight to the testimony of a law enforcement officer just because they are a law enforcement officer. Are you willing to follow this principle of law?

- Yes  
 No

\* 29. In a criminal case, the judge will instruct you that a defendant is entitled to the presumption of innocence. Are you willing to follow this principle of law?

- Yes  
 No

\* 30. In a criminal case, the judge will instruct you that, when a person has been charged with a crime, the prosecution is required to prove beyond a reasonable doubt that the crime occurred and that the person charged has committed that crime. The person charged with the crime has no obligation to prove his or her innocence, or to prove anything at all.

Are you willing to follow this principle of law?

- Yes  
 No

\* 31. In a criminal case, the judge will instruct you that a defendant has an absolute right to choose not to testify and that you may not hold that choice against the defendant or consider it in your deliberations.

Are you willing to follow this principle of law?

- Yes  
 No

\* 32. In a criminal case, if a person is found guilty, it is the job of the judge, not the jury, to decide what punishment to give. Are you willing to follow this principle of law?

- Yes  
 No

\* 33. Would you tend to favor an argument made by a prosecutor or a criminal defense attorney, or would you treat the arguments the same, regardless of who made them?

- Treat them the same
- Favor the prosecutor
- Favor the criminal defense attorney

## July: Third District Court Juror Questionnaire

### Section 6:

\* 34. Have you or an immediate family member ever suffered an injury as a result of an accident or a medical procedure?

- Yes
- No

\* 35. Do you have strong feelings, either positive or negative, towards parties who sue other parties?

- Yes
- No

\* 36. Do you have strong feelings, either positive or negative, towards parties who are sued?

- Yes
- No

\* 37. Do you feel money damages awarded in civil lawsuits are: too high, too low, just about right, no opinion?

- Too high
- Too low
- Just about right
- No opinion

\* 38. Do you have strong feelings, either positive or negative, about awarding damages for pain and suffering in a personal injury action?

- Yes
- No



\* 39. If properly supported by evidence, could you render a verdict in favor of a plaintiff and award money damages?

- Yes
- No

\* 40. If properly supported by evidence, could you render a verdict in favor of a defendant and thereby award nothing to a plaintiff?

- Yes
- No

\* 41. Do you believe there is a lawsuit crisis in the US?

- Yes
- No

July: Third District Court Juror Questionnaire

Section 7:

\* 42. Do you have any religious, philosophical, moral, or other beliefs against resolving disputes in courts?

- Yes
- No

\* 43. Is there any reason why you may not be able to be a fair and impartial juror?

- Yes
- No

If so, please explain in 30 words or less.

\* 44. Will you be able to follow the legal instructions given to you by the judge, regardless of your opinions about what the law should be, even if the legal instructions conflict with your own beliefs?

- Yes
- No

\* 45. Are you taking any medication that may affect your ability to focus?

- Yes
- No

\* 46. In 30 words or less, please tell us something interesting about you.

\* I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Signature.

\* Date completed

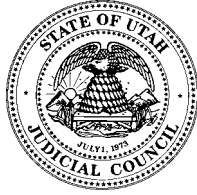
Date

Date



**66**

**Statewide Juror Qualification Form  
(except San Juan County)**



## Administrative Office of the Courts

Chief Justice Matthew B. Durrant  
Utah Supreme Court  
Chair, Utah Judicial Council

Ron Gordon  
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Sincerely,

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Matthew B. Durrant  
Chief Justice, Utah Supreme Court



**JUROR QUALIFICATION FORM INSTRUCTIONS**  
**COMPLETE THIS FORM ONLINE AT [WWW.UTCOURTS.GOV](http://WWW.UTCOURTS.GOV)**

Dear \*\* County Resident:

Your name has been drawn at random from a list of all adult citizens of the county for jury service. Please carefully read and follow these instructions to complete your questionnaire and return it to the court. **You must complete and return the form within 10 days.**

- Complete **Parts 1 and 2** of the form
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- Return the form by one of the following methods:



ONLINE

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2. Click on "Jurors." Select "Qualify Online."
3. Enter Juror Number. Your Juror Number can be found on the Juror Qualification Form.
4. Enter your Birthdate and follow the instructions.



MAIL

1. Remove this page (send only Page 3 or "**Juror Qualification Form**" and any attachments).
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The court will not contact you by phone to ask for private information. If this happens, especially if the caller threatens an arrest warrant, it may be an attempt to steal identifying information. Refuse to give the information, hang up, and call the jury clerk or your local police.

If you have any questions not answered here, please call the jury clerk at \*\*.



# JUROR QUALIFICATION FORM

COMPLETE THIS FORM ONLINE AT [WWW.UTCOURTS.GOV](http://WWW.UTCOURTS.GOV)

TERM OF JURY SERVICE: FROM \_\_\_\_\_ To \_\_\_\_\_

|                               |   |       |     |                                |       |     |               |  |  |
|-------------------------------|---|-------|-----|--------------------------------|-------|-----|---------------|--|--|
| <b>PART 1- IDENTIFICATION</b> | Juror Name  |       |     | Juror Number                   |       |     | Date of Birth |  |  |
|                               | Physical Address  |       |     | Mailing Address (If different) |       |     | Home Phone    |  |  |
|                               | City  | State | Zip | City                           | State | Zip | Work Phone    |  |  |
|                               | Email Address (This will be the Court's primary way of communicating with you.) |       |     |                                |       |     | Cell Phone    |  |  |

Fill in the circle under "yes" or "no" as appropriate.

|                              |                       |                       |  |
|------------------------------|-----------------------|-----------------------|--|
| <b>PART 2- QUALIFICATION</b> | Yes                   | No                    | Qualification  |
|                              | <input type="radio"/> | <input type="radio"/> | Have you ever been convicted of a felony that has not been expunged? If yes, please give the name of the court and the date of conviction. |
|                              | <input type="radio"/> | <input type="radio"/> | Have you appeared for jury service in Utah within the last 24 months? If yes, please give the name of the court and the date of service.   |
|                              | <input type="radio"/> | <input type="radio"/> | Are you 18 years of age or older?  |
|                              | <input type="radio"/> | <input type="radio"/> | Are you a citizen of the United States?  |
|                              | <input type="radio"/> | <input type="radio"/> | Are you a resident of ** County?   |
|                              | <input type="radio"/> | <input type="radio"/> | Are you able to read, speak and understand, or communicate, in English?  |

Fill in the circle as appropriate.

- I have no conflict dates.
- I have conflicts on the following dates:

|                           |       |                    |
|---------------------------|-------|--------------------|
| <b>PART 3- SCHEDULING</b> | Dates | Nature of Conflict |
|                           |       |                    |
|                           |       |                    |
|                           |       |                    |

You may request to be excused from jury service for undue hardship, for public necessity, or because you are incapable of jury service. You may be excused at this time because you are a mother who breastfeeds a child. If requesting to be excused from jury service, fill in the circle next to the type of excusal being requested.

- I request that the court excuse me at this time.
- I request that the court excuse me permanently.

Please explain the reason you should be excused. If your request is for medical reasons, please attach a letter from your physician supporting the request.

|                                     |  |
|-------------------------------------|--|
| <b>PART 4-REQUEST TO BE EXCUSED</b> |  |
|                                     |  |
|                                     |  |

Pursuant to Utah Code § 78B-18a-101, et seq., I declare under criminal penalty under the law of Utah that the foregoing is true and correct.

Sign Here ► \_\_\_\_\_ Date \_\_\_\_\_  
 Fill in circle if signed by someone other than the juror

|                          |
|--------------------------|
| <b>PART 5- SIGNATURE</b> |
|--------------------------|

JURY CLERK  
\*\* DISTRICT COURT  
\*\*  
CITY UT

## JUROR QUALIFICATION FORM RESPONSE REQUIRED

IF ADDRESSEE DOES NOT LIVE AT THIS  
ADDRESS OR IS DECEASED PLEASE  
INDICATE AND RETURN TO SENDER

\_\_\_\_\_ DOES NOT LIVE HERE

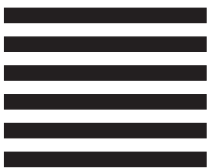
\_\_\_\_\_ DECEASED



Address

POSTAGE WILL BE PAID BY ADDRESSEE

**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 880 SALT LAKE CITY, UT



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**VERMONT**



**67**

**Statewide Jury Service Questionnaire**



**VERMONT SUPERIOR COURT**

**Jury Administration  
32 Cherry Street, Suite 350  
Burlington, VT 05401-7305  
802-865-5879  
Jud.Jury@vermont.gov**

Complete this questionnaire online at Vermont Judiciary website: [www.vermontjudiciary.org](http://www.vermontjudiciary.org) by selecting the “Jurors” button link at the top of the web page. Then select the button link “Juror Questionnaire” from the Jurors web page. You will be asked to enter your badge number. Your badge number is **Field 12** . If you do not have internet access, complete this paper form and mail it to the above address. Submit this questionnaire online or by mail **within 14 days**.

To protect your privacy, do not provide your social security number, credit card number, or mother’s maiden name over the phone. The court will never call to ask you for this information.

**Jury Service Questionnaire  
Part 1**

All information in Part 1 is open to attorneys and parties involved in cases, but is not open to the general public. You are required to complete Part 1.

|   |                  |            |
|---|------------------|------------|
| If your name or address as shown are incorrect, please correct below: |                  |            |
| <b>Field 2 Field 3 Field 1</b>  | NAME:            |            |
| <b>Field 5</b>  | MAILING ADDRESS: |            |
| <b>Field 6</b>  | TOWN/CITY:       |            |
| <b>Field 7</b>  | STATE:           |            |
| <b>Field 8</b>  | ZIP:             |            |
| <b>Field 10-Field 11</b>  |                  |            |
| Evening Phone   | Daytime Phone    | Cell Phone |
| Date of Birth   | Email            |            |

06/17 SL

**Field 2 Field 3 Field 1**

**Field 12 (Barcode font “3 of 9” with numerals)**

**Field 28, Field 17**





### Jury Service Questionnaire Part 2

All information in Part 2 is open to the general public except for any attached documentation about mental or physical conditions. You are required to complete Part 2.

|  |                              |                             |
|--|------------------------------|-----------------------------|
| Are you a citizen of the United States?  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are you able to read, write, understand and speak the English language?  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Do you have a mental or physical condition that would keep you from serving as a juror? <u>If YES, attach documentation.</u> | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Have you ever served a term of imprisonment in this state after conviction of a felony?                                      | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Are you a resident of <b>Field 61</b> County?  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Have you been summoned and appeared for jury service in a Vermont court in the last two years?                               | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Town of Residence:   |                              |                             |

**I SWEAR OR AFFIRM THAT THE STATEMENTS IN PARTS 1 AND 2 OF THIS QUESTIONNAIRE ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

\_\_\_\_\_  
Signature of **Field 2 Field 3 Field 1**

\_\_\_\_\_  
Date

**Field 2 Field 3 Field 1**

**Field 12 (Barcode font "3 of 9" with numerals)**

**Field 28, Field 17**





### Jury Service Questionnaire Part 3

All information in Part 3 is open to attorneys and parties involved in cases, but is not open to the general public. Answering the following questions may help the jury selection process proceed more quickly when you appear in court.

|   |                  |  |        |
|---|------------------|--|--------|
| Field 2 Field 3 Field 1   |                  | Former Names   |        |
| Town/City of Residence  |                  |  | Gender |
| Number of Children  | Ages of Children | Have you driven a motor vehicle in the last 5 years?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |        |
| Schools Attended - Provide the names of schools you attended in the spaces provided below.  |                  | Highest Degree Earned  |        |
| Elementary/Junior High Schools  |                  |  |        |
| High Schools  |                  |  |        |
| Colleges  |                  |  |        |
| Occupation or Business (CURRENT or PREVIOUS)  |                  | Title or Position  |        |
| Present Employer  |                  |  |        |
| Employment Duties and Responsibilities  |                  |  |        |
| Do you supervise other employees? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, how many?   |                  |  |        |
| Other trades, occupations or professions including military service, in which you have engaged since leaving school, with locations and approximate dates:  |                  |  |        |
| TRADE, OCCUPATION OR PROFESSION   | LOCATION         | APPROXIMATE DATES  |        |
|   |                  |  |        |
|   |                  |  |        |
| Have you ever served on one or more state or federal jury trials or on a grand jury? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, what type of case? <input type="checkbox"/> Criminal <input type="checkbox"/> Civil <input type="checkbox"/> Both  |                  |  |        |
| Have you ever been involved in a criminal or civil lawsuit as a party or a witness? Do not include Family Division matters such as divorce, custody, parentage, or juvenile cases. <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, briefly describe each case below and indicate whether you were a party or a witness. |                  |  |        |
| DESCRIPTION OF CASE   |                  | YOUR ROLE (Plaintiff, Defendant Or Witness)  |        |
|   |                  |  |        |
|   |                  |  |        |

Field 2 Field 3 Field 1

Field 12 (Barcode font "3 of 9" with numerals)

Field 28, Field 17





|   |  |
|---|--|
| Name of Spouse or Partner   | Occupation and Employer of Spouse or Partner |
| Please list below the occupation and employer of others living in your household who are over 18. |  |
| OCCUPATION  | EMPLOYER                                     |
|   |  |
|   |  |

If you wish to offer any additional comments or information, please write them below:

\_\_\_\_\_  
Signature of **Field 2 Field 3 Field 1**

\_\_\_\_\_  
Date

**Field 2 Field 3 Field 1**

**Field 12** (*Barcode font "3 of 9" with numerals*)

**Field 28, Field 17**



**VIRGINIA**

**68**

**Augusta County – Jury Questionnaire**



2023 JURY QUESTIONNAIRE

Within 10 days, return completed questionnaire by mail or complete online at the following website

https://eapps.courts.state.va.us/jqs218/

In accordance with Virginia law, your name has been randomly selected as a prospective juror for the Augusta County Circuit Court. This is NOT a summons to appear. Within ten days please complete this CONFIDENTIAL questionnaire and return it by mail, or complete it online at the website provided above. If you are qualified, you may be summoned for jury duty within the next year. FAILURE TO RETURN A COMPLETED QUESTIONNAIRE by mail or online may result in your being summoned to complete the form in the Circuit Court. PLEASE DO NOT CALL THE COURT WITH REQUESTS TO BE EXCUSED FROM JURY SERVICE AT THIS TIME.

GENERAL INFORMATION

NAME \_\_\_\_\_
ADDRESS \_\_\_\_\_
CITY, STATE, ZIP \_\_\_\_\_

COMPLETE REQUIRED INFORMATION BELOW:

DATE OF BIRTH [ ]/[ ]/[ ] DAYTIME PHONE: [ ]-[ ]- OCCUPATION [ ] EMPLOYER [ ] EVENING PHONE: [ ]-[ ]

IF THE ADDRESS LISTED ABOVE IS NOT A PHYSICAL ADDRESS, OR HAS CHANGED, PLEASE NOTE BELOW:

CITY [ ] STATE [ ] ZIP + 4 [ ]-[ ]

QUALIFICATIONS

Yes No 1. I am a United States citizen.
Yes No 2. I have been a resident of Virginia for the past 12 months.
Yes No 3. I have been a legal resident of Augusta County for the past 6 months.
Yes No 4. I am 18 years of age or older.
Yes No 5. I am able to communicate in the English language.
No Yes 1. I have reported as a juror in a Circuit Court within the last 3 years.
No Yes 2. I am unable to serve as a juror due to mental impairment.
No Yes 3. I have been convicted of treason or felony.
4. If yes to question 3, I have had my civil rights restored Yes No, or I have had only my right to vote restored Yes No. Date restored

CHECK THE APPROPRIATE BOX IF YOU WISH TO CLAIM AN EXEMPTION.

- 1. I am 70 years of age or older and do not wish to serve.
2. I am necessarily and personally responsible during normal court hours for providing the continuous care required by (i) a child or children age 16 years of age or younger of whom I have legal custody, or (ii) a person having a physical or mental impairment.
3. I am a mother breast-feeding a child.
4. I am a member of the armed services of the United States or the diplomatic service of the United States appointed under the Foreign Service Act, who will be serving outside of the United States.
5. Pursuant to Va. Code § 8.01-341, I am a licensed practicing attorney, a judge of any court, a member of the State Corporation Commission, a member of the Virginia Workers' Compensation Commission, a magistrate or sworn state/local law enforcement, state/local correctional or jail officer.
6. If I am required to serve on a jury: (i) a business, commercial or agricultural enterprise must close or cease to function because the services I provide are essential to the operations of the enterprise and I am the only person who performs those services; or (ii) a political subdivision will suffer undue hardship in carrying out essential services because I am the only firefighter as defined in § 65.2-102 who performs those services.

SPECIAL INSTRUCTIONS / QUESTIONS

Return completed questionnaire by mail or complete online, within 10 days.
Do you own real estate in Augusta County? Yes No
Please be sure to provide a residential address if your mailing address is a P.O. Box.
Please provide email address: \_\_\_\_\_

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THE ABOVE INFORMATION IS TRUE AND CORRECT.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_



Augusta County Circuit Court  
P.O. Box 689  
Staunton, VA 24402-0689

**OFFICIAL BUSINESS - JURY QUESTIONNAIRE**

0000076 NX H 0984 41-



Augusta County Circuit Court  
P.O. Box 689  
Staunton, VA 24402-0689

**69**

**Fairfax County – Jury Questionnaire**





## JURY QUESTIONNAIRE *CONTINUED*

You must submit this information within 10 days.

Submit online at <https://www.fairfaxcounty.gov/juror> **OR** mail this original form.

### QUALIFICATIONS

- Yes  No 1. I am a United States citizen.
- Yes  No 2. I have been a resident of Virginia for the past 12 months.
- Yes  No 3. I have been a legal resident of Fairfax,  city  county for the past 6 months.
- Yes  No 4. I am 18 years of age or older.
- Yes  No 5. I am able to communicate in the English language.
- Yes  No 6. I have reported as a juror in a Circuit Court within the last 3 years.  
If yes, list the year \_\_\_\_\_ and Court Name \_\_\_\_\_.
- Yes  No 7. I am unable to serve as a juror due to mental impairment. **(Please include a doctor's explanation.)**
- Yes  No 8. I have been convicted of treason or felony. If yes, please explain \_\_\_\_\_.
- 9. If yes to question 8, I have had my civil rights restored  Yes  No, or I have had only my right to vote restored  Yes  No Date restored \_\_\_\_\_.

### POSSIBLE EXEMPTIONS

CHECK THE APPROPRIATE BOX IF YOU WISH TO CLAIM AN EXEMPTION.

- 1. I am 70 years of age or older and do not wish to serve. Date of birth **MUST** be provided on front.
- 2. I am necessarily and personally responsible during normal court hours for providing the continuous care required by (i) a child or children age 16 years or younger of whom I have legal custody, or (ii) a person having a physical or mental impairment. **(Please include a written explanation.)**
- 3. I am a mother breast-feeding a child.
- 4. I am a member of the armed services of the United States or the diplomatic service of the United States appointed under the Foreign Service Act, who will be serving outside of the United States.
- 5. Pursuant to Va. Code §8.01-341, I am a licensed practicing attorney, a judge of any court, a member of the State Corporation Commission, a member of the Virginia Workers' Compensation Commission.
- 6. Pursuant to Va. Code §8.01-341, I am a magistrate or sworn state/local law enforcement, state/local correctional or jail office .
- 7. If I am required to serve on a jury: (i) a business, commercial or agricultural enterprise must close or cease to function because the services I provide are essential to the operations of the enterprise and I am the only person who performs those services; or (ii) a political subdivision will suffer undue hardship in carrying out essential services because I am the only firefighter as defined in § 65.2-102 who performs those service **(Please include a written explanation.)**

**Medical Condition:** If you have a medical condition that potentially prevents your service as a juror, please include a request to be excused from your doctor for consideration by the jury commissioners.

For guidance on the questionnaire process, you may contact the Circuit Court at: 703-246-7690.

**I HEREBY CERTIFY UNDER PENALTY OF PERJURY THE ABOVE INFORMATION IS TRUE AND CORRECT.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

If ADA accommodations are needed, please call (703) 246-2292. TTY 711.

**WASHINGTON**

**70**

**Washington Administrative Office  
of the Courts – Juror  
Questionnaire**

## APPENDIX B

### **Electronic Survey Instrument**

Q1 Welcome to the \_\_\_\_\_ County Juror Portal survey on demographics!

The purpose of this survey is to meet the Washington State Legislature's requirement to provide "all courts with an electronic demographic survey for jurors who begin a jury term...(Senate Bill 5092, Section 115, Section 3, 2020-2021 Legislative Session)."

To fulfill this requirement, \_\_\_\_\_ County Courts and the Washington State Administrative Office of the Courts are inviting you to participate in the demographic survey. We hope to use this information to monitor any demographic trends or changes in jury service over time, as well as assess any impacts due to the COVID-19 pandemic.

This short online survey will ask you to provide some very basic demographic information. This survey should only take about 3 minutes to complete. Participation in this survey is completely voluntary, and you may decline to answer any question without any consequences.

We will not collect any personal identifiers like your name or IP address, but we will be asking for your juror badge number, age, gender, race/ethnicity, and some other basic demographic information. Juror badge numbers are requested to track your progress through the jury selection process. Your answers on this survey are confidential. The administrators of the survey will never have access to any information that allows them to identify you and the courts will never have access to your individual survey responses that include your jury badge number. If we share our findings in publications or presentations, the results will be presented in aggregate only.

Please do not use the following email addresses for contacting the court about any matters concerning your participation in jury service (such as postponement or excusal). However, if you have any questions about this survey, contact Dr. Peter A. Collins at: [collinsp@seattleu.edu](mailto:collinsp@seattleu.edu). If you have any questions about your rights as a research participant, contact the Seattle University Institutional Review Board at: [irb@seattleu.edu](mailto:irb@seattleu.edu).

**Q2 Please include your juror ID/badge number in the space below.**

**Q3 After you complete this survey, you will be directed to the \_\_\_\_\_ County Superior Court juror registration system.**

- Click here to continue to the survey.
- I've already completed this survey or do not wish to take part, please take me to the juror registration system now.

**Q4 The following items deal with demographics. We understand that the categories listed do not capture all possible identities; this was not intentional. In the event that the categories do not accurately reflect your identities, please consider writing them in the space provided.**

**Q5 What is your age?**

- Please enter age below
- Prefer not to answer

**Q6 What is your current employment status? Please select all that apply.**

- Employed full-time
- Employed part-time
- Furloughed due to COVID-19
- Military - Active Duty
- Homemaker
- Retired
- Self-employed
- Student
- Unable to work
- Unemployed and currently looking for work
- Unemployed and not currently looking for work
- A category not listed:
- Prefer not to answer

**Q7 What is your combined household income?**

- Less than \$10,000
- \$10,000 - \$19,999
- \$20,000 - \$29,999
- \$30,000 - \$39,999
- \$40,000 - \$49,999
- \$50,000 - \$59,999
- \$60,000 - \$69,999
- \$70,000 - \$79,999
- \$80,000 - \$89,999
- \$90,000 - \$99,999
- \$100,000 - \$149,999
- More than \$150,000
- Prefer not to answer

**Q8 What is your highest level of education?**

- Some high school
- High school degree or GED
- Trade school
- Some college but no degree
- Associates degree
- Bachelor's degree
- Master's degree
- Doctorate degree
- A category not listed:
- Prefer not to answer



**Q9 Are you Hispanic, Latino/a/x, or of Spanish origin? Please select all that apply.**

- No, not Hispanic, Latino/a/x, or of Spanish origin.
- Yes, Mexican, Mexican American, Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino/a/x, or Spanish origin - Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.
- A category not listed:
- Prefer not to answer

**Q10 What is your race? Please select all that apply AND add the origin when applicable.**

**Note that these answer choices are similar to those used by the U.S. Census Bureau in 2020.**

- White – Print, for example, German, Irish, English, Italian, etc.
- Black or African American – Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.
- American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat, Traditional Government, Nome Eskimo Community, etc.
- Asian Indian
- Cambodian
- Chinese
- Filipino
- Japanese
- Korean
- Vietnamese
- Other Asian – Print, for example, Pakistani, Cambodian, Hmong, etc.
- Guamanian or Chamorro
- Native Hawaiian
- Samoan
- Other Pacific Islander – Print, for example, Tongan, Fijian, Marshallese, etc.
- Middle Eastern or North African - Print, for example, Lebanese, Egyptian
- Some other race – Print race or origin, for example, Hispanic, Latino/a/x, etc.
- Prefer not to answer

**Q11 What is your gender identity? Please select all that apply.**

- Woman
- Man
- Agender
- Gender queer or gender fluid
- Non-binary
- Questioning or unsure
- Transgender man
- Transgender woman
- An identity not listed:
- Prefer not to answer

**Q12 What is your sexual orientation? Please select all that apply.**

- Heterosexual (straight)
- Asexual
- Bisexual
- Gay
- Lesbian
- Pansexual
- Queer
- Questioning or unsure
- An identity not listed:
- Prefer not to answer

**Q13 Have you ever experienced any barriers that impact your ability to attend jury service? Please select all that apply.**

- Work-related conflicts or hardship (1)
- Financial hardship (2)
- Dependent care (prenatal, nursing/infant, child, adult, etc.) (3)
- Transportation (accessibility, parking, safety) (4)
- Disability or health/mental health related hardship (5)
- COVID-related issues or hardship (8)
- Other - Please explain (6)
- Prefer not to answer (7)

# APPENDIX C

## Paper Survey Instrument



### JURY DEMOGRAPHIC SURVEY

The following information will not in any way affect your eligibility to serve as a juror. The Court is collecting this to learn the demographics of the jury pool. Your participation is voluntary and anonymous.

YOUR PARTICIPATION IS REQUESTED – PLEASE FILL IN APPROPRIATE CIRCLES

**1. What is your age?**

For example: If you are 42 years Old, you would bubble in the 4 and the 2, like this:

|                                  |                                  |
|----------------------------------|----------------------------------|
| 4                                | 2                                |
| <input type="radio"/>            | <input type="radio"/>            |
| <input type="radio"/>            | <input type="radio"/>            |
| <input type="radio"/>            | <input checked="" type="radio"/> |
| <input type="radio"/>            | <input type="radio"/>            |
| <input checked="" type="radio"/> | <input type="radio"/>            |

|                       |                       |
|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
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| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |
| <input type="radio"/> | <input type="radio"/> |

**2. What is your current employment status? Please select all that apply.**

- Employed full-time
- Self-Employed
- Employed part-time
- Student
- Furloughed (COVID)
- Unable to work
- Homemaker
- Active Military
- Retired
- Prefer not to answer
- Unemployed, Looking for work
- Unemployed, Not looking for work

**3. What is your combined household income?**

- less than \$10,000
- 60,000-69,999
- 10,000-19,999
- 70,000-79,999
- 20,000-29,999
- 80,000-89,999
- 30,000-39,999
- 90,000-99,999
- 40,000-49,999
- 100,000-149,999
- 50,000-59,999
- more than 150,000
- Prefer not to answer

**4. Highest level of education?**

- Some High School
- Bachelor's Degree
- High School /GED
- Master's Degree
- Trade School
- Doctorate Degree
- College NO Degree
- Category not listed
- Associates Degree
- Prefer not to answer

**5. Are you Hispanic, Latino/a/x, or of Spanish origin? Please select all that apply.**

- No
- Yes, Cuban
- Yes, Spanish
- Category not listed
- Yes, Puerto Rican
- Prefer not to answer
- Yes, Mexican, Mexican American, Chicano

**6. What is your race? Please select all that apply.**

- White
- Vietnamese
- Black or African American
- Chinese
- Asian Indian
- Cambodian
- Filipino
- Japanese
- Korean
- Native Hawaiian
- Samoan
- Other Asian
- American Indian
- Alaska Native
- Guamanian or Chamorro
- Other Pacific Islander
- Middle Eastern
- North African
- Some other race (e.g., Hispanic/Latino/a/x)
- Prefer not to answer

**7. What is your gender identity? Please select all that apply.**

- Woman
- Non-binary
- Man
- Trans Man
- Agender
- Trans Woman
- Queer or Fluid
- Uncertain
- Category not listed
- Prefer not to answer

**8. What is your sexual orientation? Please select all that apply.**

- Heterosexual (straight)
- Lesbian
- Asexual
- Pansexual
- Bisexual
- Queer
- Gay
- Uncertain
- Category not listed
- Prefer not to answer

Thank you for your cooperation (one survey per juror please)

**WEST VIRGINIA**

**71**

**Jury+ WebGen Statewide Online Juror Portal  
Help Guide**



**WVSCA Technology  
Jury+ WebGen  
Online Juror Portal  
Help Guide**



**Online Juror Portal**

To access the online juror portal, please visit:

<https://jury.courtswv.gov/login>

**Logging In**

The screenshot shows the login page for the Juror Online Response Portal. At the top left is the seal of the Supreme Court of Appeals, West Virginia. To its right, the text "JURY Web Solution" is displayed. Below this is a yellow box containing the following text:

**TRAINING**  
**STATE OF WEST VIRGINIA**  
**JUROR ONLINE RESPONSE PORTAL**

Welcome to the State of West Virginia's Juror Online Response Portal. Please follow the directions below to begin:

**LOGIN INSTRUCTIONS:**

- Enter your "Badge Number" (located near the bar code on your form).
- Enter your date of birth. (MM/DD/YYYY, including slashes).
- Click **SIGN IN** button one time only.

If you are unable to fill out the questionnaire online, please complete and submit the questionnaire and profile portion of your summons by mail, fax, or email.

For additional information, click [Here](#) to go to the West Virginia Judiciary Jury Information page.

Below the instructions are two input fields: "Badge Number" with the value "153513" and "Birth Date" with the placeholder "MM/DD/YYYY". Below the birth date field is the text "Format: MM/DD/YYYY".

At the bottom right of the page are two buttons: a green "Help ?" button and a blue "Sign In" button.

Please enter the **Juror Badge Number** (located on the Questionnaire you received in the mail) and your full **Birth Date**. You will need to include the slashes (i.e. 01/01/1980). Click **Sign In**.



**Initial E-Notification Opt-In Screen**

Personal Contact & Messaging Info

PLEASE NOTE:

In order to receive electronic notifications regarding a request to be disqualified or excused from service, you **MUST** opt into E-Notification for the e-mail and/or text services.

\*\*\*\* If you cannot see the "SUBMIT" or "SIGNOUT" Buttons at the bottom right of this page, please zoom out by using the CTRL and "-" (minus) keys on your keyboard, or by using the zoom function in your browser.\*\*\*\*

Do you want to Activate automatic E-Notification for messages regarding y

Yes - Activate  No - I do not want any E-notifications at this time

If you would like to opt-in to Text and Email notifications, please click the radio button beside **Yes – Activate**, If you would not like to opt-in at this time, please click the radio button beside **No – I do not want any E-notifications at this time**.

Please provide the following Contact Information

Regardless of your settings below, you will only receive E-Notifications if you have a valid email address and/or a valid cell phone number.

Primary Cell Phone

Can this phone be used for E-notifications?

Yes  No

Please indicate the Cell provider

Enter your **Primary Cell Phone Number**. Click the radio button beside **Yes**. Choose your **Cell Provider**.

Primary Email Address

Re-Enter Email Address

Enter your **Primary Email Address**, then **Re-Enter** the email address for verification.

Secondary Cell Phone

Can this phone be used for E-notifications?

Yes  No

Please indicate the Cell provider

**\*OPTIONAL\*** Enter a **Secondary Cell Phone Number** or **Secondary Email Address**.

Secondary Email Address

Re-Enter Email Address

You may opt-in to E-Notifications at any time during your service as a juror.





## Dashboard

**JURY+ Web Solution** Dashboard Juror Details Service Sign Out

**Supreme Court of Appeals West Virginia**

Juror Name: Badge Number: Juror Status: Summomed  
Current Reporting Date (Subject to change.): 04/01/2020

### Dashboard

Welcome to the State of West Virginia's Juror Online Response Portal. Specific information can be found below for the county to which you have been summoned.

Please verify that your name and address information is correct. If your information needs to be updated, please do so using the "Juror Details" tab to the left, or, click the "Next" button below.

**PLEASE NOTE** -Changing your address on the Juror Details page does NOT automatically excuse you from jury service. You must complete the "Qualification Questionnaire" and indicate that you are no longer a resident of the county in which you were summoned.

You must also change your address with the West Virginia Department of Transportation -DMV. Click [HERE](#) to go to the Change of Address form on their site.

You must also change your address with the West Virginia Voter. Click [HERE](#) to go to the Registration update page on their site.

If your information is correct, please select the "Qualification Questionnaire" response.

**PLEASE NOTE:**  
WV Code § 52-1-5a REQUIRES that you fill out this form and return it to the Circuit Clerk's office or complete this online form **within 10 days** of receipt.

**Current Juror Status** This is your current status:

Badge Number: [Redacted]  
Current Juror Status: Summomed

**Reporting Information** Your reporting information if you are in a summoned status:

Current Reporting Date (Subject to change.): [Redacted]  
Reporting At: [Redacted]  
Reporting Number: [Redacted]

**Personal Information** Your Date of Birth and Address information:

Date of Birth: [Redacted]  
Mailing Address: [Redacted]  
Residential Address: [Redacted]

[Next](#)

**Please review the messages regarding your address on the Dashboard.**

**Your information is on this page. Please review it for accuracy.**



## Juror Information

**JURY Web Solution** Dashboard Juror Details Service Sign Out

Supreme Court of Appeals West Virginia

Juror Name: [Redacted] Badge Number: 100000000 Juror Status: Summoned  
Current Reporting Date (Subject to change.): 04/01/2020

**Juror Details**

This message is the same as on the **Dashboard**. Please review this message.

To add or update your contact information, please click on EDIT, delete the old information (if any), enter the new information and click the SUBMIT button at the bottom of the section to save your changes.

**PLEASE NOTE** -Changing your address here does NOT automatically excuse you from jury service. You must complete the "Qualification Questionnaire" and indicate that you are no longer a resident of the county in which you were summoned.

You must also change your address with the West Virginia Department of Transportation -DMV. Click [HERE](#) to go to the Change of Address form on their site.

You must also change your address with the West Virginia Voter Registration. Click [HERE](#) to go to the Registration update page on their site.

**Juror Information** Please update your name if it has changed or is incorrect

Last Name  
First Name  
Middle Name  
Name Suffix

Your information is on this page. Please review it for accuracy.

**Address Information** Please update your Home/Mailing Address if it has changed or if it is incorrect

**Mailing Address**

Address 1  
Address 2  
City  
State  
Zip

**Physical Address**

Address 1  
Address 2  
City  
State  
Zip

Next →



**Qualification Questionnaire**

**Qualification Questionnaire**

Your name has been drawn by random selection for Jury Service from Secretary of State Records. The full cooperation of every citizen is necessary if our system of justice is to function fairly and efficiently.

Complete the following questionnaire by entering the requested information. Once you have completed the entire questionnaire, click the **SUBMIT** button at the bottom of the page one time only.

Refusing to answer or making false statements could result in fine, imprisonment, or both for contempt of court. All information provided will be used for court purposes only.

**WV Code § 52-1-5a** REQUIRES that you fill out this form and return it to the Circuit Clerk of the county you are summoned to within 10 days of receipt.

NOTE: Please DO NOT submit the paper questionnaire.

\* Indicates a required field

**JUROR INFORMATION**

Please complete the following:

Date of Birth: \*  (Format mm/dd/yyyy)

Age: \*  (Digits only. Maximum 2 digits.)

Home Phone Number: \*  (Digits only. No text or punctuation.)

Work Number:

Cell Phone Number:  (Maximum 10 digits. Digits only, no text or punctuation.) (Please enter the same number you entered for E-Notification.)

All fields marked with \* must be completed in order to submit the Questionnaire.

**AGE EXEMPTION - 70 AND OVER**

I wish to be excused from service.  
 I wish to serve.

**QUALIFICATION Section**

(For the questions below, please select "Yes" or "No")

- Are you a citizen of the United States? \*  Yes  No
- Are you a resident of the county to which you have been summoned? \*  Yes  No
- Are you at least 18 years of age? \*  Yes  No
- Are you able to speak, read, and understand the English language? \* (This requirement is met by the ability to communicate in American sign language, signed English, or by oral interpretation.) \*  Yes  No
- Have you attended court as a prospective juror or served as a petit, grand, or magistrate court juror within the past two years? \*  Yes  No
- Do you have any special needs or circumstances that would seriously impair your ability to serve as a juror? \* If yes, please attach a doctor's note using the "Upload Document" Tab to the left. Please explain in the box below. \*  Yes  No
- If you have special needs or circumstances, can you render competent service with reasonable accommodation, please complete the information on the "Request Assistance" Tab to the left.  Yes  No
- Have you lost the right to vote because of a criminal conviction? \* If yes, please explain in the box below. \*  Yes  No

NOTE: If you need additional space, please attach an explanation using the "Upload Document" Tab to the left.

- Have you ever been convicted of perjury, false swearing or any crime punishable by imprisonment for more than one year? \* If yes, please explain in the box below.  Yes  No

NOTE: If you need additional space, please attach an explanation using the "Upload Document" Tab to the left.

- Are you currently an officeholder under the laws of the United States or of this State? (Note: Notary Public is not an office.) \* If yes, please explain in the box below. \*  Yes  No

NOTE: If you need additional space, please attach an explanation using the "Upload Document" Tab to the left.

Requests to be excused and any dates that you cannot serve will be entered in these boxes.

**JUROR DEMOGRAPHICS**

Please answer all of the following questions.

- Gender: \*  Male  Female  Other
- Marital Status: \*  Single  Married  Divorced  Widowed  Other
- Ethnicity: \*  Hispanic or Latino  Non-Hispanic or Non-Latino
- Race: \* NOTE: This item is included only to satisfy legal requirements and will not affect the selection of jurors. \*  American Indian or Alaskan Native  Asian or Pacific Islander  Black  White  Other
- Occupation: \*
- Employer: \*
- Need Work Slip? \*  Yes  No
- Education: \*  Less than high school  High School or Equivalent  Vocational  College  Postgraduate
- Do you pay real estate property taxes (on OWNED land) in this county? \*  Yes  No
- Number of miles round trip from residence to courthouse: \*
- Spouse's Name: \*  (Please enter "N/A" if not applicable.)
- No. of Children under 18: \*  (Numbers only, no punctuation or text.) Maximum 3 digits.
- Spouse's Occupation: \*  (Please enter "N/A" if not applicable.)
- Spouse's Employer: \*  (Please enter "N/A" if not applicable.)

**REQUESTS FOR EXCUSAL**

Attach any papers or evidence that might support your request to be excused, using the "Upload Documents" tab to the left.

I request to be excused from jury service for the following reasons of undue hardship, extreme inconvenience, or public necessity:

I am unavailable on the following dates due to vacations:

I am unavailable on the following dates due to medical conflicts:

Please use your full name to sign. Enter the date you complete the Questionnaire. You must include slashes, i.e. 01/01/1980. Click **SUBMIT**.

I hereby declare that all responses I have made on this form are true to the best of my knowledge. I hereby acknowledge that I understand that a false statement or any willful misrepresentation made on this form is punishable by a fine of not more than five hundred dollars (\$500) or confinement in jail for not more than thirty (30) days, or both fine and jail confinement per WV Code § 52-1-5a.

Signature:  (Type in full legal name.)

Date:  (Type in today's date. Use MM/DD/YYYY format.)

I hereby certify under penalty of perjury the foregoing is true and correct.

**Submit**



**Left Navigation Pane and Dropdown Menu**

You can use the **Left Navigation Pane** or the **Dropdown Menu** to quickly access each section of the Juror Dashboard. You can use this to add conflict dates, update your information or opt-in to E-Notifications at any time.

**Upload Documents**

**Upload Documents**

To attach and send supporting documentation electronically to the Circuit Clerk's office:

- 1) Click on the "BROWSE" button, which will open the File Explorer on your computer.
- 2) Select the document to be attached, and click on the "OPEN" button. The file name will appear next to the "BROWSE" button.
- 3) Enter the Title of the document in the Title field. Please NO special characters or punctuaion. (i.e., commas, dashes, semicolons, question marks, exclamation points.)
- 4) Enter a description of the document and/or any other relevant information in the "Comment" box
- 5) Click on the "UPLOAD" button. The document file name will be listed along with the Upload Date, File Size, and any comments entered.
- 6) To attach multiple files, continue to "Browse" and "Upload" until all desired documents are uploaded.

Supported file extensions are: DOC DOCX JPG JPEG PDF PNG

Maximum File Size is 25 MB.

Browse...

Title:

Comment:

Upload

You can upload documents here. You will browse for the document and select it. You will then add a title or any comments you wish to accompany your document.

**WISCONSIN**

72

**Statewide Juror Qualification Questionnaire**





**WYOMING**



73

**Sweetwater County – Statewide Juror  
Questionnaire**

**Juror Questionnaire**  
**District Court, 3rd Judicial District**  
**Sweetwater County, State Of Wyoming**

Please note that you have the option to provide juror questionnaire information to the court online at: [ejuror.courts.state.wy.us](http://ejuror.courts.state.wy.us)

Should you wish to complete the written Juror Questionnaire, please carefully read and complete the following questions.

Deliver or mail the completed form **within ten (10) days** of receiving this letter.

Both sides/pages of this form must be completed in INK.

**You must return this questionnaire even if you are requesting an excusal or exemption for any reason.**

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**Return To: Donna Lee Bobak - Clerk of Court**  
**80 West Flaming Gorge Way Suite 255, P.O. Box 430, Green River, WY 82935**

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Juror Name: DOE, JOHN

**On Behalf**

Are you the person named above? Y\_\_\_ N\_\_\_

Are you responding on behalf of the person because he/she is deceased? Y\_\_\_ N\_\_\_

Please provide the month and year of death: \_\_\_/\_\_\_ (mm/yyyy)

If you are responding for someone who is in the military, is a student, or you are the guardian/caretaker of the juror, please proceed on behalf of the juror.

**Contact Information**

Physical Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Work Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Ext: \_\_\_\_\_

Would you like to receive notifications via email? Y\_\_\_ N\_\_\_

Email: \_\_\_\_\_

Would you like to receive notifications via text messaging? Y\_\_\_ N\_\_\_

Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Mobile Carrier (i.e., Verizon, AT&T, Union Wireless): \_\_\_\_\_

\*Standard carrier rates apply. If you choose to receive notifications by text, you are also strongly encouraged to choose to receive notifications by email and provide a valid email address to ensure you receive timely information regarding your jury service.\*

**Qualification**

Are you a citizen of the United States? Y\_\_\_ N\_\_\_

Can you read, write, speak, and understand the English language? Y\_\_\_ N\_\_\_

Are you a resident of the county for which you were summoned? Y\_\_\_ N\_\_\_

Have you lived in the this county for longer than 90 days? Y\_\_\_ N\_\_\_

Are you 18 years of age or older? Y\_\_\_ N\_\_\_

Have you been convicted of a felony? Y\_\_\_ N\_\_\_

Year (yyyy) and state where convicted: \_\_\_\_\_

Have you been pardoned or have your rights been restored? Y\_\_\_ N\_\_\_

Date pardoned/restoration: \_\_\_/\_\_\_/\_\_\_ (mm/dd/yyyy)

Do you have any mental or physical condition which could impair your ability to serve as a juror? Y\_\_\_ N\_\_\_

Please Explain: \_\_\_\_\_

---

Do you wish to be excused from jury service because of a mental/physical condition? Y\_\_\_ N\_\_\_

If requesting to be disqualified for a mental/physical condition, you must provide a signed letter from your doctor on letterhead or prescription pad.



**Bio Form**

Employment Status: \_\_\_\_\_

Your Current Employer: \_\_\_\_\_

Your Current Occupation: \_\_\_\_\_

Please give your last employer and occupation: \_\_\_\_\_

How many years have you lived in Wyoming? \_\_\_\_\_

How many years have you lived in this county? \_\_\_\_\_

Please state your prior place of residence: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Please provide your spouse's occupation: \_\_\_\_\_

How many miles will you travel round-trip to the court? \_\_\_\_\_

What is your highest level of education? \_\_\_\_\_

Have you or any member of your immediate family been a party to a lawsuit? Y\_\_\_ N\_\_\_

Have you or any member of your immediate family or close friends ever suffered any bodily injury?  
Y\_\_\_ N\_\_\_

Has a claim for personal injury ever been made against you or have you ever made a claim for personal injury?  
Y\_\_\_ N\_\_\_

Are you currently represented by an attorney? Y\_\_\_ N\_\_\_

Please provide the names of your attorneys: \_\_\_\_\_

Are you related to or close friends with any law enforcement? Y\_\_\_ N\_\_\_

Have you or members of your immediate family been a victim of a crime? Y\_\_\_ N\_\_\_

Do you or any member of your immediate family have an interest in or are either of you employed by an insurance company? Y\_\_\_ N\_\_\_

Do you require any special accommodations in order to serve as a juror? Y\_\_\_ N\_\_\_

Please describe the necessary accommodations:

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

Have you previously served as a juror? Y\_\_\_ N\_\_\_

Please list location, year, case type (i.e. criminal/civil): \_\_\_\_\_

**Exemption**

Are you age 72 or older? Y\_\_\_ N\_\_\_

If yes, do you wish to be exempted from jury service for this term? Y\_\_\_ N\_\_\_

If yes, do you wish to be permanently exempted from future jury service? Y\_\_\_ N\_\_\_

Do you wish to claim a status exemption? Y\_\_\_ N\_\_\_

You may be excused upon your request for a status exemption if you are an elected official; a member of an organized fire, police, or other county law enforcement agency; or an active duty member of the National Guard.

**If you are completing this paper questionnaire, request for excusal must be submitted in writing. You must submit this request yourself. Unless you are notified by the court that you have been excused or released from jury service, you must appear.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

I swear or affirm under the penalty of perjury that the foregoing information supplied on the attached sheets is true and correct.



**WASHINGTON, D.C.**

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**Jury Summons and Juror  
Qualification Form**



OFFICE OF THE  
CLERK OF THE SUPERIOR COURT  
OF THE DISTRICT OF COLUMBIA  
WASHINGTON, D.C. 20001-2131

# No Records

PRE-SORTED  
FIRST-CLASS MAIL  
U.S. POSTAGE  
PAID  
WASHINGTON D.C.  
PERMIT NO. 1726

## OFFICIAL JURY SUMMONS

OPEN TO ALL • TRUSTED BY ALL • JUSTICE FOR ALL

[www.dccourts.gov/jurorservices](http://www.dccourts.gov/jurorservices)

Información en español:  
(202) 879-4604, opción 2.

### JUROR QUALIFICATION FORM

Please Complete This Form Online At: [www.dccourts.gov/jurorservices](http://www.dccourts.gov/jurorservices)

OR Complete Below and Mail

YOU ARE REQUIRED BY LAW TO RESPOND IMMEDIATELY UPON RECEIPT



Please indicate whether the following describes you:

- |   | YES                          | NO                       |
|---|------------------------------|--------------------------|
| 1. U.S. Citizen   | <input type="checkbox"/> -1- | <input type="checkbox"/> |
| 2. Resident of D.C. for the last 6 months   | <input type="checkbox"/> -2- | <input type="checkbox"/> |
| 3. 18 years or older  | <input type="checkbox"/> -3- | <input type="checkbox"/> |
| 4. Able to read, speak, and understand English  | <input type="checkbox"/> -4- | <input type="checkbox"/> |
| 5. Served jury duty in the D.C. Superior Court within the last 2 years<br>If yes, please give dates and name under which you served: _____  | <input type="checkbox"/> -5- | <input type="checkbox"/> |
| 6. Have a pending felony or misdemeanor charge in any D.C., federal, or state court   | <input type="checkbox"/> -6- | <input type="checkbox"/> |
| 7. Have been convicted of a felony<br>If yes, it has been at least 10 years since the completion of your incarceration, parole or probation | <input type="checkbox"/> -7- | <input type="checkbox"/> |

Juror's Name \_\_\_\_\_

Name Changes, If Any \_\_\_\_\_

Last 4 Digits of Social Security Number: \_\_\_\_\_  
(Required for IRS 1099 form)

Sex: M  F

Race/Ethnicity:

D.C. Law requires you to indicate your race in order to avoid discrimination in jury selection. Please select one or more that describe your race.

Am. Indian/Alaska Native  Asian  Black/African Am.

White  Hispanic/Latino  Two or More Races

Other \_\_\_\_\_

Date of Birth (Month/Day/Year): \_\_\_\_/\_\_\_\_/\_\_\_\_

FOLD LINE ▲

FOLD LINE

▲ FOLD LINE

If it has not been at least 10 years, it has been at least 1 year since the completion of your incarceration, parole or probation

- |  |                              |                          |
|--|------------------------------|--------------------------|
| 8. Have a physical or mental disability which would not permit you to serve as a juror<br>If yes, please explain briefly and submit a verifiable medical certificate | <input type="checkbox"/> -8- | <input type="checkbox"/> |
|--|------------------------------|--------------------------|

Address Changes, If Any \_\_\_\_\_

Phone Number:  Cell  Home

E-mail Address \_\_\_\_\_

I agree to receive juror notifications via:

Email  Text

Employment:  Government  
(Check One)  Retired

Non-Government

Unemployed

Accommodations:

- |   |                              |                          |
|---|------------------------------|--------------------------|
| 9. If you are Deaf or Hard of Hearing, are you requesting one of the following?<br><input type="checkbox"/> ASL <input type="checkbox"/> PSE <input type="checkbox"/> ORAL <input type="checkbox"/> CART <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> -9- | <input type="checkbox"/> |
|---|------------------------------|--------------------------|

10. Please list any accommodations you require to enable you to serve:  
\_\_\_\_\_  
\_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Will your employer pay your salary during your service?

Yes  No

Any person who intentionally misrepresents a material fact on a juror qualification form for the purpose of avoiding or securing service as a juror may be fined not more than \$300 or imprisoned not more than 90 days, or both (D.C. Code §11-1906).

I HEREBY CERTIFY UNDER THE PENALTIES OF PERJURY THAT MY RESPONSES TO THE ABOVE QUESTIONS ARE TRUE TO THE BEST OF MY KNOWLEDGE.

Signature \_\_\_\_\_

Date \_\_\_\_\_

▼ FOLD HERE ▼

▼ FOLD HERE ▼

▼ FOLD HERE ▼

### PLEASE MOISTEN THIS AREA AND 2 SPOTS AT SIDES, FOLD AND RETURN

▼ FOLD, CREASE AND CAREFULLY TEAR ALONG PERFORATION ▼

▼ FOLD, CREASE AND CAREFULLY TEAR ALONG PERFORATION ▼

**Jury Summons**

PLEASE BRING THIS SECTION WITH YOU WHEN YOU REPORT FOR JURY DUTY. DO NOT MAIL THIS SECTION BACK.

BY ORDER OF THE CHIEF JUDGE OF THE SUPERIOR COURT OF THE DISTRICT OF COLUMBIA, YOU ARE HEREBY SUMMONED TO APPEAR IN COURT AT THE TIME AND PLACE SPECIFIED IN THE ATTACHED NOTICE.

REMOVE THESE EDGES FIRST  
SLIDE FINGER OR PENCIL UNDER  
TOP EDGE TO OPEN

REMOVE THESE EDGES FIRST  
SLIDE FINGER OR PENCIL UNDER  
TOP EDGE TO OPEN

REMOVE THESE EDGES FIRST  
FOLD, CREASE AND TEAR ALONG PERFORATION

REMOVE THESE EDGES FIRST  
FOLD, CREASE AND TEAR ALONG PERFORATION

MOISTEN  
HERE

MOISTEN  
HERE