

NOTE: WITHIN FIVE DAYS, PLEASE RETURN THE JUROR INFORMATION QUESTIONNAIRE AND JUROR INFORMATION CARD IN THE ENCLOSED ENVELOPE

JUROR INFORMATION QUESTIONNAIRE

(please print)

1. Is your Name/Address correct? If not, make the necessary changes here:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

1. a. Age: _____ (If you are 70 years or older and wish to be excused, YOU MUST attach a letter requesting an excuse; you may stop completing this form.)

b. Place of Birth: _____

2. a. Daily shift hours: FROM: _____ TO: _____ Regular days off: _____

b. Total hours worked each week: _____

c. Are you a salaried employee of the U.S. Government? [] Yes [] No

d. How long have you lived at this address? _____

e. Do you? [] own home, [] rent home, [] rent apartment, [] live with parents/relative, or [] live with friends

f. Is your current address in a [] rural or [] urban area?

g. What other addresses have you had in the last 5 years?

3. Do you consider yourself: [] Caucasian, [] Black, [] Asian/Asian American, [] Native American, [] Hispanic, [] Other: _____

4. Your occupation: (If retired, your occupation prior to retirement.)

5. Place of employment and job description: _____

6. Years employed in present job: _____

7. Do you supervise others at this job? [] Yes [] No If yes, how many? _____

8. Do you have a second job? [] Yes [] No Describe what you do and place of employment:

9. What was your prior full-time occupation, if any? (Include job description and place of work.)

10. Do you have any physical or mental problems that might interfere with your service as a juror?
[] Yes [] No If yes, describe: _____

**NOTE: IF YOU WISH TO BE EXCUSED DUE TO PHYSICAL OR MENTAL INFIRMITY,
YOU MUST ENCLOSE A LETTER SETTING FORTH THE PHYSICAL OR MENTAL CONDITION.**

11. Are you taking any medications which by law must be prescribed by a physician?
[] Yes [] No If yes, list drugs prescribed: _____

13. Have you ever been convicted of or pled guilty or nolo contendere to a felony charge? (A felony charge is a crime for which the punishment could be a year or more in prison.)
[] Yes [] No If yes, give details: _____

14. Have you or any close member of your family ever been arrested or charged with a criminal offense?
[] Yes [] No If yes, please give:
a. Person's relationship to you _____
b. Offense in which person was charged _____
c. Year when arrest or charge was made _____
d. Outcome of arrest or charge _____

15. Have you or any close member of your family ever been a victim of crime? [] Yes [] No
If yes, please give:
a. Person's relationship to you _____
b. Describe incident _____

16. Have you or any close member of your family ever sued anyone in court? [] Yes [] No
If yes, please:
a. Describe lawsuit _____

b. Give outcome _____

17. Have you or any close member of your family ever been sued? [] Yes [] No
If yes, please:
a. Describe lawsuit _____

b. Give outcome _____

18. Have you or any close member of your family ever filed for bankruptcy? [] Yes [] No
If yes, please:
a. Describe type of bankruptcy _____
b. Give outcome _____

19. Have you, or any close member of your family, consulted with a lawyer in the last five years? [] Yes [] No
If yes, for what reason? _____

20. Have you ever appeared as a witness before a grand jury? [] Yes [] No
If yes, where and when? _____

21. Have you ever served on a grand jury? Yes No If yes, when, where and how many times?

22. Have you ever appeared as a witness in a criminal or civil prosecution? Yes No
 If yes, when, where and for which side: -----

23. Have you ever served on a trial jury? Yes No If yes, when, where and how many times?

 Was your jury service criminal civil both
24. Have you ever served as a foreperson of a jury? Yes No
25. Have you ever given a deposition (a statement under oath) in a legal proceeding? Yes No
26. Marital status: never married, married for _____ years, separated, divorced in _____,
 widowed in _____
27. If married, please give:
 a. Spouse's name -----
 b. Spouse's occupation -----
 c. Spouse's place of work and business telephone -----
 d. Spouse's job description -----
 e. Years spouse employed in present job -----
28. Number of children: _____ boys, _____ girls
29. List each child's (a) age, (b) occupation, (c) place of employment or school, and (d) city of residence:

30. List any hobbies, spare-time activities, outside interests: -----

31. Have you ever lived outside of the southeastern United States? Yes No
 If yes, where and when: -----

32. a. Last year of school completed: elementary/grade, junior high, high school, junior college,
 vocational degree, undergraduate degree, graduate work, postgraduate work,
 other -----
 b. Major area of study: -----
 c. Are you currently attending school? Yes No If yes, where? -----

33. a. What newspaper do you read most often? -----
 b. Do you subscribe? Yes No Sunday subscription only Yes No
 c. How often do you read it? once a week, 2-3 times a week, 4 or more times a week,
 every day, only when something special is reported, Sunday only
 d. What out-of-town paper do you read? -----

34. a. What television programs do you watch regularly? _____

 b. How many times a week do you watch television news? _____
35. List the magazines and periodicals you read: _____

36. Are there any bumper stickers on the car that you or your spouse drive? [] Yes [] No
 If yes, what do they say? _____

37. Do you attend church, synagogue, or other religious facility once a month or more often? [] Yes [] No
 If yes, name of church, synagogue or other facility: _____

38. Please list any social, professional, civic, victim or civil liberties organizations that you are a member of

39. Have you ever served in the military? [] Yes [] No If yes:
 a. What branch _____
 b. What was your main occupation while in the service _____
 c. What was your highest rank _____
 d. How long did you serve _____
40. Have you ever worked in a law enforcement related job, such as police, sheriff, trooper, prison guard or
 military police? [] Yes [] No If yes, what type job? _____
41. Have you ever been employed or volunteered your time in a social work related job? [] Yes [] No
 If yes, please describe _____

42. Have you, or any close member of your family, ever had a problem which you attribute to drugs or alcohol?
 [] Yes [] No If yes, please explain _____

43. Have you ever received or applied for any of the following benefits? [] veteran's benefits, [] social
 security, [] welfare, [] A.F.D.C. (Aid to families with dependent children), [] unemployment, []
 basic education grant, [] C.E.T.A. benefits, [] educational scholarships, [] any other type of federal, []
 state or county benefits _____
44. Estimated number of miles ROUND TRIP from your home to the courthouse to which you are summoned:

UNDER PENALTY OF PERJURY, I DO HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF,
 ALL OF THE ANSWERS HEREIN GIVEN ARE TRUE AND CORRECT.

 (Signature)

 (Date)