

JUROR QUESTIONNAIRE
PLEASE COMPLETE WITHIN 10 DAYS

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Miles 1-way to Courthouse: _____ Birth date: _____
Race: _____ Home Phone: _____ EMAIL: _____
Occupation: _____
Employer: _____
Address: _____ Bus. Phone: _____
City: _____ State: _____ Zip: _____
Are you a U.S. Citizen? _____ A resident of Marshall Co? _____

What is your COVID-19 vaccination status?

Yes? 1st shot _____ 2nd shot _____ No? _____

Marital Status:

Married/Civil Union: _____ Maiden Name (if applicable): _____

Single: _____ Widowed: _____ Divorced: _____

List the name, age, and occupation of spouse and children:

Have you ever been called to be a juror? _____ When? _____

Were you chosen to be a juror? (please circle) Yes No

Was there a verdict rendered? (please circle) Yes No

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

Have you ever made a claim for personal injury? _____

If yes, explain: _____

Has personal injury claim ever been made against you? _____

If yes, explain: _____

Have you been party to a lawsuit, civil or criminal? _____

If yes, explain: _____

Are you related to or friends of a law enforcement officer? _____

If yes, explain: _____

Have you been convicted of a crime, excluding minor traffic? _____

If yes, explain: _____

Would jury service cause an undue hardship? _____

If yes explain: _____

ACKNOWLEDGEMENT

I hereby acknowledge service of summons to appear for service as a Petit Juror on the date and time specified by the summons.

Date: _____ **Signature:** _____

Jury Sequence number: _____ **Call Number:** _____