

# 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
- 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*):

<input type="checkbox"/> Evaluating claims for loss or damage	<input type="checkbox"/> Law enforcement
<input type="checkbox"/> Law	<input type="checkbox"/> Accident reconstruction or biomechanics
<input type="checkbox"/> Medicine	<input type="checkbox"/> 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)