## 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:
Emj	ployment
<b>5</b> .	Are you employed? Yes No If yes, occupation:
	Current employer:
Rela	tionship Information
6.	Are there other adults in your household? Yes No
	If yes, their occupations:
Edu	cation
7.	High school graduate: Yes No College graduate: Yes No Postgraduate degree: Yes No
8.	If college or postgraduate degrees, degrees obtained:
Prio	r Jury Service
9.	Have you served on a jury before? Yes 🦲 No 🦳 If yes: Civil 🦳 Criminal 🦳
11. 12.	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   Is there any matter not covered by this questionnaire that could affect your ability to understand the proceedings or to be a face
decla uest	and impartial juror? Yes No If yes, describe:
	(DATE) (SIGNATURE OF JUROR)
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