

**CALHOUN COUNTY JURY COMMISSION
CALHOUN COUNTY COURTHOUSE
P.O. BOX 69
MORGAN, GA 39866**

Name: _____
Address: _____
City: _____ State _____ Zip Code: _____

COMPLETE AND RETURN SURVEY TO THE CLERK OF SUPERIOR COURT

SECTION A – QUALIFICATIONS

Trial by jury is fundamental principle of our system of justice. Jury service is therefore both an opportunity and an obligation of every American citizen. This is a questionnaire, not a summons for jury service. Your name has been electronically drawn by random selection from a list of residents of this county. You are being considered for jury service in this county. This is a way of obtaining information about you from which we can determine whether you are qualified to serve as a juror pursuant to state law. Your cooperation and willingness to return this questionnaire fully completed is greatly appreciated by the Superior Court of Calhoun County. **IF ANOTHER PERSON FILLS OUT THIS FORM, PLEASE INDICATE THAT PERSON’S NAME, ADDRESS AND REASON WHY.**

Please Yes or No for each question.

1. Are you at least 18 years of age? Yes No
2. Are you a citizen of the United States? Yes No
3. Have you been a resident of Calhoun County for at least 6 months? Yes No
4. Have you ever been convicted of a felony? Yes No
If Yes, were your civil rights restored? Yes No
5. Do you speak and understand the English language? Yes No
6. Are you a registered voter? Yes No
7. Do you have any physical or mental disability that would interfere with or prevent you from serving as a juror? Yes No
8. Race: Black White Hispanic Asian Other
9. Sex: Male Female
10. What is your date of birth? _____ Current Age _____

SECTION B – EXEMPTIONS

This section describes certain categories of persons who may be excused from jury service as a juror. If you are a person in one of these categories and you wish to be excused, circle the letter of the category that applies to you.

- A. **Circle A** if you are 70 years of age or older and you request the jury commission remove your name from Calhoun County jury file. You are encouraged to serve jury duty after age 70. **If it is your desire to continue serving as a juror do not select this exemption.**
- B. **Circle B** if you are full time student in school outside Calhoun County. Your jury service may be deferred. Give name of school and county in which you currently reside. Include expected graduation date.
- C. **Circle C** if you are the primary care giver having active care and custody of a child under the age of four (4) and have no reasonably available alternative child care.
- D. **Circle D** if you are the primary teacher of a home school program.
- E. **Circle E** if you are a member in active service of the Armed Forces of the United States on ordered Military Duty over 50 miles from home, and/or for longer than 90 days.
- F. **Circle F** if you hold any elected office of the United States, State or Local Government or if you have held any such office within the last 2 years.
- G. **Circle G** if you have a medical disability that would prevent you from serving jury duty. ***An affidavit from your physician concerning your disability is required and must accompany this questionnaire when returning it.***
- H. **Circle H** if you have been convicted of a felony and have not had your civil rights restored to you.

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

Sign here _____

Date _____

Please mail this completed form to:

Karen F. Taylor
Clerk of Superior Court
Calhoun County
P.O. Box 69
Morgan, GA 39866