Juror #_____

JUROR INFORMATION CIVIL QUESTIONNAIRE; ALL INFORMATION IS CONFIDENTIAL AND LIMITED TO USE FOR JURY SELECTION; THIS DOCUMENT IS NOT A PUBLIC RECORD;

PLEASE COMPLETE ENTIRE FORM

NAME: LAST	FIRST	MIDDLE INITIAL
CITY/TOWNSHIP	COMMUNITIES IN WHICH YOU RESIDED OVER THE PAST 10 YEARS:	
DATE OF BIRTH:	PLACE OF BIRTH:	
OCCUPATION	OCCUPATION(S) PAST 10 YEARS	
OCCUPATION OF SPOUSE/OTHER	PAST 10 YEARS OCCUPATION OF SPOUSE/OTHER	
NUMBER OF CHILDREN _____ NUMBER OF MEMBERS OF HOUSEHOLD _____	OCCUPATION OF CHILDREN AT PRESENT TIME AND IN PAST 10 YEARS _____	

WHO ARE THE MEMBERS OF YOUR HOUSEHOLD?

NAME	AGE	RELATIONSHIP	OCCUPATION/EMPLOYMENT HISTORY

ARE THERE ANY MEMBERS IN YOUR HOUSEHOLD OTHER THAN YOUR SPOUSE AND CHILDREN? IF SO, PLEASE LIST:

_____

_____

MARITAL STATUS:
MARRIED ☐ SINGLE ☐ SEPARATED ☐ DIVORCED ☐ WIDOWED ☐

RACE:
WHITE ☐ BLACK ☐ HISPANIC ☐ OTHER ☐

LEVEL OF EDUCATION: YOURS _____

SPOUSE/OTHER _____

CHILDREN _____

JUROR INFORMATION QUESTIONNAIRE

	YES	NO
1. Do you have any physical or psychological disability that might interfere with or prevent you from serving as a juror?	☐	☐
2. Are you presently taking any medication that might interfere with or prevent you from serving as a juror?	☐	☐
3. Do you have any religious, moral, or ethical beliefs that would prevent you from sitting in judgment in in a civil case and rendering a fair verdict?	☐	☐
4. Have you ever been involved as a party or a witness in a civil lawsuit or criminal case?	☐	☐
5. Do you have a relationship, friendship or association with a law enforcement officer, a lawyer, or any person affiliated with the courts of any judicial district?	☐	☐
6. Do you or any member of your immediate family have a relationship to the insurance industry, including employee, claims adjustor, investigator, agent or stockholder in an insurance company?	☐	☐
7. Do you have a license to operate a motor vehicle?	☐	☐

I hereby certify that the answers on this form are true and correct. I understand that false answers provided herein subject me to penalties under 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

ACCEPT SERVICE AT ONCE OR YOU WILL BE SERVED BY THE SHERIFF.

SIGNATURE _____ **DATE** _____