



CONFIDENTIAL – Jury Questionnaire
Superior Court of California, County of San Bernardino

Please answer all of the following questions and bring this summons when reporting for jury service

Juror ID #: _____

1. Name: _____

2. Please provide your Phone Number: () _____ Work Number: () _____

3. Is your address correct on the summons? Yes No If "No," please provide your correct address

_____ Street Address _____ City _____ State and Zip Code _____

4. Are you a U.S. Citizen? Yes No If "No," what is your country of citizenship? _____

5. Are you 18 years of age or older? Yes No If "No," what is your date of birth? (MM/DD/YY) _____

6. Do you reside in the State of California? Yes No If "No," what state do you reside in? _____

7. Do you reside in San Bernardino County? Yes No If "No," what county do you reside in? _____

8. Have you fulfilled your obligation as a Trial Juror or Grand Juror in the past 12 months, excluding your most recent summons?
 Yes No If "Yes," which Court Name? _____ Service Date: DD/YY) _____

9. Have you been convicted of a felony and are currently on parole, post-release community supervision, felony probation, or mandated supervision for the conviction? Yes No

9a. Do you have a malfeasance in office conviction, for which your civil rights have not been restored? Yes No

9b. Are you currently incarcerated in any prison or jail? Yes No

9c. Are you currently required to register as a sex offender under Penal Code 290 based on a felony conviction? Yes No

10. Has a court ever appointed a conservator to handle your affairs? Yes No
If "Yes," what is the Court Name? _____ Case Number: _____

11. Are you a peace officer as defined in sections 830.1, 830.2(a) or 830.33(a) of the Penal Code? Yes No Badge #: _____
If "Yes," please indicate the organization: CA Highway Patrol Police Department Sheriff Other: _____

12. Do you have a physical and/or mental disability or impairment that you believe renders you incapable of performing jury service?
 Yes No If "Yes," then one of the boxes below must be checked.
 Temporary Medical Excusal – Health care providers note required.
 Permanent Medical Excusal – Health care providers note required.
 Permanent Medical Excusal – 70 years of age or older. No health care providers note required. Date of Birth: (MM/DD/YY) _____

13. Do you have a verifiable, non-professional obligation to provide care for another between the hours of 8:00 AM and 5:00 PM, Monday through Friday and alternative arrangements are not feasible? Yes No If "Yes," please provide the following information:
Age of person cared for: _____ Relationship to person cared for: _____
Type of care you provide: _____
Are you employed? Yes No If "Yes," what are your work days/hours? _____

14. Are you active duty military? Yes No If "Yes," what Branch/Station: _____

15. Occupation: _____ Self Employed Employer Name: _____
Does your employer pay for jury service? Yes No
If "Yes," how many days? 1 to 5 days 6 to 10 days 11 to 20 days 21 days or more
If "No," how many days could you serve? 1 to 5 days 6 to 10 days 11 to 20 days 21 days or more
Will Jury Service cause an extreme financial hardship for you? Yes* No If "Yes," please complete the following:
Are you the sole source of household income? Yes No How many family members are in the household? _____
What is the monthly household income? Include all sources from all household members (Salary; wages; alimony; public benefits, etc.)
\$ _____ ***If claiming a financial hardship, the court will require you to provide a letter from your employer confirming that you would lose wages, salary or commission during jury service.**

16. Do you have reasonable access to private or public transportation? Yes No

16a. Do you plan to use public transportation? Yes No
If yes, do you want the court to provide you with a bus pass? Yes No

17. Is the total one way commute time from your home to the courthouse more than 90 minutes? Yes No

18. Do you work for a federal, state, or local government agency, which includes county, city, and school district? Yes No

19. Non-governmental employees: Do you want to be paid your daily juror fees? Yes No

20. Government and non-government employees, do you want to be paid for your juror mileage? Yes No

It is perjury to falsify an excuse from jury service (Penal Code Section 126). I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct (Code of Civil Procedure section 2015.5(b)). If the person signing is not the prospective juror please indicate your relationship to the prospective juror next to your signature.

EVERYONE MUST SIGN AND DATE HERE: _____
Signature Date