

**JUROR INFORMATION QUESTIONNAIRE**  
**CONFIDENTIAL**  
**TO BE USED FOR JURY SELECTION PURPOSES ONLY**

NAME: LAST	FIRST	MIDDLE INITIAL	US CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO
MAILING ADDRESS :		CITY:	ZIP: PHONE NUMBER: (Home) (Work)
MARTIAL STATUS: MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/>			
OCCUPATION		OCCUPATION(S) PAST 10 YEARS	
OCCUPATION OF SPOUSE/OTHER		PAST 10 YEARS OCCUPATION OF SPOUSE/OTHER	
NUMBER OF CHILDREN		RACE: <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> HISPANIC <input type="checkbox"/> OTHER	
LEVEL OF EDUCATION YOURS		SPOUSE/OTHER	

- |   | YES                      | NO                       |
|---|--------------------------|--------------------------|
| 1. Have you ever served as a juror before?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 1a. If so, were you ever on a hung jury?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you have any religious, moral, or ethical beliefs that would prevent you from sitting in judgment in a criminal case and rendering a fair verdict?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you have any physical or psychological disability that might interfere with your serving as a juror?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you or anyone close to you ever been the victim of a crime?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Have you or anyone close to you ever been charged with or arrested for a crime, other than a traffic violation?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you or anyone close to you ever been an eyewitness to a crime, whether or not it ever came to court?...   | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you or anyone close to you ever worked in law enforcement or the justice system? This includes police, prosecutors, attorneys, detectives, security or prison guards, and court related agencies.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Would you be <u>more likely</u> to believe the testimony of a police officer or any other law enforcement officer because of his or her job?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Would you be <u>less likely</u> to believe the testimony of a police officer or any other law enforcement officer because of his or her job?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Would you have any problem following the court's instruction that the defendant in a criminal case is presumed to be innocent unless and until proven guilty beyond a reasonable doubt?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Would you have any problem following the court's instruction that the defendant in a criminal case does not have to take the stand or present evidence, and it cannot be held against the defendant if he or she elects to remain silent or present no evidence?..... | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Would you have any problem following the court's instruction in a criminal case that just because someone is arrested, it does not mean that the person is guilty of anything?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. In general, would you have any problem following and applying the judge's instruction on the law?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Would you have any problem during jury deliberations in a criminal case discussing the case fully but still making up your own mind?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Are you presently taking any medication that might interfere with or prevent you from serving as a juror?...  | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Is there any reason you could not be a fair juror in a criminal case?.....  | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Have you ever been <u>convicted</u> of a criminal misdemeanor or felony in any jurisdiction?.....   | <input type="checkbox"/> | <input type="checkbox"/> |
| Offense: _____  |                          |                          |
| Where? _____  |                          |                          |
| When? _____   |                          |                          |

**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.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

