TERM OF COURT:	JUDGE:	DATE:	LOCATION:			
Name:			Address:			
	Sen	d questionnaire to	P.O. Box 128, Macon, GA 31202			
Date of birth:			Place of Birth:			
Home Phone (including area code):						
Work Phone (including area code):						
Do you wish to receive text notification messages? Yes No Cell Carrier:						
Cell Phone (includin	g area code): _					
Email address:						
Estimated number o	of miles one wa	y from your home	o the courthouse:			
Are you employed by the United States government? \square Yes \square No						
I do hereby declare	that, to the bes	t of my knowledge	and belief, all of the answers given herein	are true and correct.		
 (Signature)			(Date)			

What is your gender? ☐ Male ☐ Female What is your age? Do you consider yourself? ☐ Caucasian ☐ African-American ☐ Asian ☐ Hispanic ☐ American Indian ☐ Other
If you have ever lived outside of Georgia, please list where (street address not necessary):
What was the last year of school that you finished? ☐ Elementary ☐ Junior High ☐ High School ☐ Vocational/Technical ☐ Junior College ☐ College ☐ Graduate Work ☐ Post Graduate Work ☐ Other
If your education is above high school, list the major area of study and/or degree(s) earned:
Are you currently attending school? \square Yes \square No \square If yes, what course of study?
While in school did you attend: \square Public \square Private \square Home School
Do you have plans to continue your education? \square Yes \square No If yes, what are those plans?
Have you or any member of your immediate family ever received training or education in any of the sciences: e.g. medicine; physics; engineering; etc.? No If yes, explain:
Are you currently employed? Yes No If yes, what is your occupation and provide a brief description of your job?
If you are employed, please give the name and address of employer:
Number of years in your present job? Number of hours you work per week?
Do you supervise others at your job? \square Yes \square No \square If yes, how many? Are you supervised by others? \square Yes \square No
Do you have a second job? ☐ Yes ☐ No If you do have a second job, please give the name and address of employer:
Have you ever owned or operated a business? Yes No If yes, when and what kind of business? List any job(s), other than your current job, that you have had as an adult:
Are you retired? No
If you are retired, from where are you retired?

What was your main duty while in the service?	
What was your highest rank?	When did you serve?
What is your marital status? ☐ Single ☐ Marrie ☐ Widowed ☐ Separated ☐	· · · · · · · · · · · · · · · · · · ·
If divorced or widowed, what was your spouse's oc	cupation?
If married, what is your spouse's name? Where is your spouse employed?	 How many years?
What is your spouse's occupation?	
Do you have children? ☐ Yes ☐ No If you do If you have children currently in school, do they att ☐ Public ☐ Private ☐ Home	end: School
If you have children, please list the child's nam	e; age; city of residence; and place of employment, if applicable:
sheriff's office; corrections; IRS; district attorney, e	ever been employed in law enforcement or prosecutorial work? (e.g., tc.) Yes No
Have you or any member of your immediate family \Box Yes \Box No	been employed in the health care field?
Have you or any member of your immediate family ☐ Yes ☐ No If yes, give a brief descrip	ever been the victim of a crime? otion:
Does any member of your immediate family suffer Yes No If yes, explain:	
	ever received a medical disability rating for employment?
Do you have any physical problems that might inte \(\subseteq \text{Yes} \subseteq \text{No} \subseteq \text{If yes, describe:} \)	rfere with your service as a juror?
IF YOU WOULD LIKE TO REQUEST TO BE EXCUSED IN REQUEST AND INCLUDE IT IN THE RETURN ENVELO	BASED ON ANY HEALTH ISSUE, PLEASE SUBMIT A SEPARATE WRITTEN OPE ALONG WITH THIS QUESTIONNAIRE.
Have you ever been convicted or pled guilty or no	olo contendere to a felony charge? (A felony is a crime for which the
punishment could be a year or more in prison.) \Box	
If yes, explain:	
If convicted, were your civil rights restored?	s

Do you have a felony charge pending against you now? \square Yes \square No
Have you ever been a party to a lawsuit? Yes No If yes, briefly describe the type of lawsuit and the outcome:
If you have never been a party to a lawsuit, have you ever had a claim asserted against you? Yes No If yes, explain:
If you have never been a party to a lawsuit, have you ever asserted a claim against someone for personal injuries or property damage? Yes No If yes, explain: No If yes, when and where?
Have you ever served on a trial jury? □ Yes □ No If yes, when; where; and how many times?
If you served on a trial jury, did you reach a verdict?
List any hobbies, spare-time activities or outside interests:
List all newspapers, magazines, TV and radio programs, including talk shows, or any computer based media that you regularly rely on for news:
Do you have reliable transportation from your home to court each day? Yes No IF YOU WOULD LIKE TO REQUEST TO BE EXCUSED BASED ON ANY TRANSPORTATION PROBLEMS, PLEASE SUBMIT A SEPARATE WRITTEN REQUEST AND INCLUDE IT IN THE RETURN ENVELOPE ALONG WITH THIS QUESTIONNAIRE. How do you feel about the prospect of serving as a juror?
Because of religious beliefs, some people feel they cannot sit in judgment on another person. Do you feel this way? Yes No