

HOW TO CORRECTLY COMPLETE THE QUALIFICATION QUESTIONNAIRE FORM

1. Use ONLY Blue or Black Ink pen that does not bleed or smear.
2. Respond to ALL questions – by completely filling in the circle under the correct answer with pencil. Do NOT mark the circle with an ‘**x**’ or ‘**✓**’ mark – **regardless of whether the answer is a ‘yes’ or a ‘no’ response.**

CORRECT WAY TO FILL IN THE CIRCLE	●
INCORRECT WAY TO FILL IN THE CIRCLE	x
INCORRECT WAY TO FILL IN THE CIRCLE	✓

3. Review the name and address information. Draw a single line through any incorrect information and print any corrections in the block where the address and name are found. Change only incorrect information.
4. Be sure to indicate your Current County or residence in the appropriate block. **Please Do NOT list the COUNTRY of residence.**
5. Question #7 should ONLY be answered if you answer ‘YES’ to either question #5 or #6. If both questions #5 and #6 are ‘NO’ – do not respond to question #7.
6. When responding to question #14, (*Grounds for Requesting Excuse*), there are only two (2) grounds available. All others will be considered at the time a summons is issued. If either of the two categories listed under the circles apply to you – fill in the appropriate circle. Excuse requests based on health reasons of the prospective juror, should be responded to in Question #8 on the left of this form, with further explanation provided on the back as directed. Do NOT mark circle #8 in **this** section. Do NOT mark circle #3 through #10 in this section – they do not refer back to other questions on the form. Some federal courts have up to 10 categories for requesting excuse. *The Middle District of North Carolina has only 2 categories.*
7. Be sure to sign your name.
8. Indicate the date the form was completed and signed to the right of your signature in the appropriate space.
9. Mail the form back in the enclosed pre-addressed postage-paid envelope. If the business reply mail envelope is not available you should mail the completed form to:
U.S. District Court
Office of the Clerk
324 W. Market Street
Greensboro, NC 27401-2544
Attn: JURY SECTION
10. If you currently permanently reside outside of the Middle District – you must submit proof of your permanent residence – by copy of your current valid driver license or other state or federal photo id. Utility bills, rental agreements, tax bills, paycheck stubs, etc. are not considered valid proof of permanent residence. If you not a U.S. Citizen, you must submit a copy of documentation such as your “Green Card” or resident alien status or non-citizen worker paperwork, so that your name can be removed as a potential juror for this federal court.



United States District Court

MIDDLE DISTRICT OF NORTH CAROLINA
U. S. District Court - MDNC
L. Richardson Preyer Courthouse
324 West Market Street
Greensboro, NC 27401-2544



Important Directions:

- Save time and money by completing this form on the court's website. www.ncmd.uscourts.gov
- If completing a paper copy:
 - Use a blue or black ink pen.
 - Make solid marks that fill the oval completely.
 - Do not write in margins nor in "official use only" areas.

FOR OFFICIAL USE
Jurors Please Do Not Write In This Space

Q
X
E
D

Right Wrong

County You Now Live In
Durham

100225019

TO: If your name and permanent address are not correct, please make corrections here.

Participant #

100225019



JANE Q. PUBLIC *Do*
226 ELM STREET APT 2-D *333 Maple Ave.*
GREENSBORO, NC 27401 *Durham, NC*
27707-4119

Home Cell Phone

Work Phone (Home)

Email

336-1234567

919-7654321

janeqdoe05@yahoo.com

Area Code Number

Area Code Number

JUROR QUALIFICATION QUESTIONNAIRE

Please Read Letter On Other Side Before Completing

If another person fills out the form, please indicate that person's name, address and reason why in the "Remarks" section.

Fill In Completely Your Response To Each Question.

1. Are you a citizen of the United States? Yes No
2. Are you 18 years of age or older? Yes No
 Date of Birth: Give your age 59
 Month 03 Day 30 Year 1958
3. Has your primary residence for the past year been in this state? Yes No
 If "No", show under Remarks on reverse the names of other counties or states of primary residence during the past year and show dates. Yes No in the same county?
4. a. Do you speak the English language? Yes No
 b. Do you read, write, and understand the English language with a degree of proficiency sufficient to complete this questionnaire? Yes No
 c. Did you provide remarks on the back of this form to explain your answers to part "a" or part "b" of this question? Yes No
5. Are any charges now pending against you for a violation of state or federal law punishable by imprisonment for more than one year? Yes No
6. Have you ever been convicted, either by your guilty or nolo contendere plea or by a court or jury trial, of a state or federal crime for which punishment could have been more than one year in prison? Yes No
7. (If "Yes"), Were your civil rights restored? (If "Yes", explain on the reverse side) Yes No
8. Do you have any physical or mental disability that would interfere with or prevent you from serving as a juror? (If "Yes", please see notes to Question 8 on reverse side). Yes No
9. Are you employed on a paid full time basis as a:
 a. Public official of the United States, state, or local government who is elected to public office or directly appointed by one elected to office Yes No
 b. Member of any governmental police or regular fire dept. Yes No
 c. Member in active service of the U.S. armed forces Yes No
10. Are you Hispanic or Latino? Yes No
11. Federal law requires you to indicate your race in order to avoid discrimination in jury selection. (See note on reverse side). Please fill in completely one or more circles that describe your race.
 Black/African American Asian American Indian/Alaska Native
 White Native Hawaiian/Pacific Islander
 Other (specify) _____

13. OCCUPATION (See reverse side)
- Are you now employed? Yes No
- Are you a salaried employee of the U.S. gov't? Yes No
- Your Usual Occupation, Trade, or Business
Dog Groomer
- Your Employer's Name
Fluff & Puff Doggy Spa
- Business or Employer's Address
333 Maple Ave., Durham NC 27707
14. Grounds For Requesting Excuse (see Notes to Question 14 on other side). **DO NOT MARK BUBBLES 3 - 10 IN THIS SECTION!**
- This section describes certain categories of persons who may be excused from service as a juror. If you are a person in one of these categories listed below and you wish to be excused, fill in completely the oval for the number of your category listed below here:
- | | | | |
|---|-----------------------|----|-----------------------|
| 1 | <input type="radio"/> | 2 | <input type="radio"/> |
| 3 | <input type="radio"/> | 4 | <input type="radio"/> |
| 5 | <input type="radio"/> | 6 | <input type="radio"/> |
| 7 | <input type="radio"/> | 8 | <input type="radio"/> |
| 9 | <input type="radio"/> | 10 | <input type="radio"/> |
- Or, if you wish to serve, do not show anything here. Persons showing a category of excuse which requires more information must give it on the other side under "Remarks".

ONLY THE TWO (2) CATEGORIES BELOW ARE FOR EXCUSE IN #14

(1) Persons over 70 years of age.
 (2) A person who is currently serving as Volunteer Safety personnel, (Volunteer Safety personnel are individuals serving a public agency in an official capacity, without compensation, such as firefighters, members of a rescue squad or ambulance crew).

SAMPLE

There are **ONLY 2** (two) bubble selections for Grounds For Requesting Excuse under Section #14. They are described above. **VERY IMPORTANT:** If you wish to be excused because you are currently at least 59 years of age fill in bubble #1 in section 14, and you must include your date of birth and age by question #2 on this form **AND sign and date the form at the bottom of the page.** If you are requesting excuse under option #2 as Volunteer Safety Personnel, you must provide the agency name, your title and/or job description and the name, title and contact information of the head of that agency.

Requests for **PERMANENT MEDICAL EXCUSE** should be noted at question #8 and you must include with the completed qualification questionnaire, a current letter from your personal physician detailing why **your physician feels** you should be permanently excused. Requests for **TEMPORARY MEDICAL** issues should be made **only if you receive a summons and will NOT be considered at this time.** Any and All excuse requests for hardships, vacations, student status, employment issues, transportation, etc., **should be made only if and when you receive a summons and will NOT be considered at this time.**

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

SIGN HERE

Jane Q Doe

Date *August 18, 2017*

If your address changes after you have returned the questionnaire, please notify the court promptly by letter or post card, addressing it to "Attention: Jury Administrator."

FOR OFFICIAL USE

Dear Prospective Juror:

Your name has been drawn by random selection, and you are being considered for jury service in the United States District Court. Trial by jury is a keystone of our system of justice. Jury service is, therefore, both an opportunity and an obligation of every American. Jurors will receive mileage and, unless they are federal government employees, an attendance fee for each day of service.

In order for us to obtain some information about you from which we can objectively determine whether you are qualified to serve pursuant to federal law, please complete the questionnaire on the reverse side of this form. You **must** answer every question, sign, date and **return the form in the enclosed envelope within ten days.**

If you are unable to fill out this form, someone else may do it for you provided that person indicates in the "Remarks" section why it was necessary for him or her to do so instead of you.

If you do not return this questionnaire form, fully completed, within ten days you are liable to be summoned to report at your expense for completion of the questionnaire at this office.

Do not attach anything to this form. Please write your comments on the "Remarks" section. **Do not ask to be excused by telephone.**

If your address changes after you have returned this questionnaire, please notify us promptly by letter or post card, addressing it to "Attention: Jury Administrator".

Clerk, United States District Court

Remarks

Use the space below to complete any answers to the questionnaire which require more information or more space. Show the number(s) of questions to which you are further responding.

NOTES REGARDING THE QUALIFICATION FORM

Question 3 - RESIDENCE. If you answered "No", that your primary residence was not in the same state or county for the past year, name the other states and counties of primary residence, and give dates.

Question 5 and 6 - CRIMINAL RECORD. If your answer to either question 5 or 6 is "Yes", please show under "Remarks": (a) date of the offense, (b) date of the conviction (or date of pending charge), (c) nature of the offense, (d) the sentence imposed (if a conviction), and (e) the name of the court. One is disqualified from jury service only for criminal offenses punishable by imprisonment for more than one year, but it is the maximum penalty, and not the actual sentence, which controls.

NOTE - Answer Question 7 only if your answer to Question 6 is "Yes."

Question 8 - YOUR HEALTH. If you claim a mental or physical disability, please explain and/or enclose proof of it in a separate document. **Do not attach anything to the form.**

NOTE - Do not ask the court to call your doctor. Any doctor's statement you obtain regarding your physical condition must be sent to the court by you rather than by the doctor.

Qualified individuals with disabilities have the same opportunity and obligation to serve as jurors as individuals without disabilities. If you have a disability that would affect, but not prevent, your serving as a juror, please advise and explain under "Remarks" or by enclosing a separate unattached letter.

Question 11 - RACE. Federal law requires you as a prospective juror to indicate your race. This answer is required solely to avoid discrimination in juror selection and has absolutely no bearing on qualifications for jury service. By answering this question you help the federal court check and observe the juror selection process so that discrimination cannot occur. In this way, the federal court can fulfill the policy of the United States, which is to provide jurors who are randomly selected from a fair cross section of the community.

Question 13 - OCCUPATION. Federal law requires that you answer the questions about your occupation so that the Federal Courts may determine promptly whether you fall within an excuse or exemption category (See Questions 9 and 14).

Question 14 - GROUNDS FOR EXCUSE. If one of the categories listed in Question 14 applies to you and you wish to be excused for that reason, fill in completely the circle for your category at Question 14. Please make sure you also give, under "Remarks", such information as may be requested within the excuse category. You may still be qualified to serve if the court determines upon review that you appear to be eligible for service. Other persons may be excused only by showing jury service would cause them undue hardship or extreme inconvenience.

Box Number 15 - YOUR SIGNATURE. Be sure you have signed the form. If another person had to fill out this questionnaire for you, that person must indicate his or her name, address and reason why under "Remarks".

SAMPLE - DO NOT USE - Please call if a New One is Needed