FAUQUIER COUNTY CIRCUIT COURT
29 Ashby Street
Warrenton, VA 20186

00611

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29 Ashby Street
Warrenton, VA 20186

☐ ADDRESSEE IS DECEASED

Date of Death MM-DD-YYYY

2021 Jury Questionnaire

You may fill this form out online at https://jury.fauquiercounty.gov

OR RETURN COMPLETED QUESTIONNAIRE WITHIN 10 DAYS

In accordance with Virginia law, your name has been randomly selected as a prospective juror for Fauquier County Circuit Court. This is NOT a summons to appear. Please complete this CONFIDENTIAL questionnaire and return it within ten days. If you are qualified, you may be summoned for jury duty within the next year. FAILURE TO SUBMIT A COMPLETED QUESTIONNAIRE may result in your being summonsed to complete the form.

SPECIAL NOTICE: THIS IS NOT A SUMMONS.THIS INFORMATION IS GATHERED TO OBTAIN POTENTIAL JURORS FOR NEXT YEAR. YOU ARE REQUIRED BY LAW TO SUBMIT A COMPLETED QUESTIONNAIRE.

GENERAL INFORMATION

Home or Work Phone ___-___-____

Mobile ___-___-____

Occupation

Employer

Email Address

COMPLETE THE INFOMATION BELOW **ONLY** IF YOUR PHYSICAL ADDRESS IS DIFFERENT THAN THE ADDRESS SHOWN ABOVE

Number

Street

City

State VA

Zip ____-____

THIS IS A 2 SIDED FORM ... PLEASE TURN OVER AND COMPLETE SIDE 2

2021 Jury Questionnaire

00612

SUBMIT COMPLETED QUESTIONNAIRE WITHIN 10 DAYS

QUALIFICATIONS

Check all that may apply

- ☐ 1. I am a United States citizen.
- ☐ 2. I am a resident of Virginia for the past 12 months.
- ☐ 3. I am a legal resident of Fauquier County for the past 6 months.
- ☐ 4. I am 18 years of age or older.
- ☐ 5. I am able to communicate in the English language.

EXCLUSIONS

Check all that may apply

- ☐ 1. I have reported as a juror in a Circuit Court within the last 3 years.

  If Yes, list year and Court

  YYYY

- ☐ 2. I am unable to serve as a juror due to mental, physical, or other impairment. (Please include written explanation)
- ☐ 3. I have been convicted of treason or a felony. (List court where convicted and year below)

  YYYY

  - ☐ I have had my civil rights restored on MM-DD-YYYY
  - ☐ I have had my right to vote restored on MM-DD-YYYY

POSSIBLE EXEMPTIONS

CHECK THE APPROPRIATE BOX IF YOU WISH TO CLAIM AN EXEMPTION. CHECKING A POSSIBLE EXEMPTION DOES NOT GUARANTEE EXEMPTION FROM SERVICE. YOU MUST APPEAR IF A SUMMONS IS RECEIVED.

- ☐ 1. I am 70 years of age or older and do not wish to serve.
- ☐ 2. I am necessarily and personally responsible during normal court hours for providing the continuous care required by (i) a child or children age 16 years or younger of whom I have legal custody, or (ii) a person having a physical or mental impairment. (Please include written explanation)
- ☐ 3. I am a mother breast-feeding a child.
- ☐ 4. I am on active duty with the armed forces of the United States or the Commonwealth of Virginia.
- ☐ 5. I am a licensed practicing attorney.
- ☐ 6. I am a sworn law enforcement, correctional, or jail officer.
- ☐ 7. If I am required to serve on a jury: (i) a business, commercial or agricultural enterprise must close or cease to function because the services I provide are essential to the operations of the enterprise and I am the only person who performs those services; or (ii) a political subdivision will suffer undue hardship in carrying out essential services because I am the only firefighter as defined in Section 65.2-102 who performs those services. (Please include written explanation)

SPECIAL INSTRUCTIONS/QUESTIONS

- ☐ I own real estate in Fauquier County

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THE ABOVE INFORMATION IS TRUE AND CORRECT.

Signed _____ Date _____

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