

IN THE SUPREME COURT OF THE STATE OF ARIZONA

In The Matter Of:)	
A NEW JURY QUESTIONNAIRE	,	Administrative Order
FORM FOR THE SUPERIOR	,)	No. 98- 29
COURT IN NAVAJO COUNTY)	·
)	
)	

On May 28, 1998, Juanita Mann, Clerk of the Superior Court in Navajo County, pursuant to Rule 18.3, Rules of Criminal Procedure, requested the Court's approval of a new jury questionnaire form. A review of the form indicates that it collects all the information necessary and proper to determine whether a person meets the eligibility requirements for jury service established by ARS 21-201, 202, the notice requirements of the Americans with Disabilities Act of 1990, and the informational requirements of Rule 18.3.

Now, therefore, pursuant to Article VI, Section 3, of the Arizona Constitution,

IT IS ORDERED that the questionnaire is approved for immediate use by the Superior Court in Navajo County in the form as submitted and attached hereto.

DATED this	25th day of	June	. 1998.
DATED HIS	uav oi		. 1770.

THOMAS A. ZLAKET CHIEF JUSTICE



JURY QUESTIONNAIRE

Navajo County Superior Cour P.O. Box 668 Holbrook, AZ 86025

Please complete entire questionnaire and answer all questions.

GENERAL INFORMATION		QUALIFICATIONS			
NAME	1.	ARE YOU A CITIZEN OF THE UNITED STATES?	YES	<i>NO</i>	
OCCUPATION	2 .	ARE YOU A RESIDENT OF NAVATO COUNTY?			
EMPLOYER	<i>3.</i>	ARE YOU 18 YEARS OF AGE OR OLDER?			
FRIOR JUTY SERVICE?	4.	HAVE YOU BEEN ADJUDICATED AN INCAPACITATED * PERSON?			
IF YES, WHEN and WHERE	5 .	DO YOU SPEAK AND UNDERSTAND ENGLISH?			
	6 .	HAVE YOU BEEN CONVICTED OF A FELONY?			
I HEREBY DECLARE UNDER PENALTY OF PERJURY THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.		a. IF YES, WHAT and WHERE			
SIGN		b. HAVE YOUR CIVIL RIGHTS BEEN RESTORED BY LEGAL PROCESS?			
DISABILITIES: Access to jury service is available to all individuals with a disability as required by the Americans with Disabilities Act of 1990. If you are a person with a disability and require special accommodations, please indicate your requirements below:		*Adjudicated an incapacitat means a Court has determin individual lacks sufficient un or capacity to make or commesponsible decisions due to physical impairment.	ed that anderstand municate	an ding e	
Please complete:		REQUEST FOR EXC	USE		
MAILING ADDRESS	0	HARDSHIP DUE TO AGE A HARDSHIP DUE TO HEALTH YO DOCTOR'S STATEMENT	GE OU MUS		
CITYZIP		CARE-GIVER FOR A SICK, AGED YOU MUST ATTACH A DOCTO			
MESSAGE PHONE WORK PHONE	FROM	OU REQUEST AN EXCUSE JURY SERVICE?	res	□ <i>NO</i>	
☐ IF THIS IS A NEW ADDRESS PLEASE CHECK	# YES	S, EXPLAIN			
Fold on dotted line, seal, stamp and return within ten (10) days.	IF YOU	U ARE EXCUSED FROM JURY SERVIC AIL.	E. YOU W	ILL BE NOTIF	

Clerk of the Superior Court P.O. Box 668 Holbrook, AZ 86025

OFFICIAL BUSINESS JURY QUESTIONNAIRE IMMEDIATE ATTENTION REQUESTEE

***************************************	***************************************
Dear Citizen:	
Your name has been drawn for prospective jury service. Please within TEN (10) DAYS.	answer all the questions on the reverse side, sign and return
Your qualification as a Juror, temporary excuse, or deferment of	service will be based on the information you provide herein
DO NOT MAKE ANY CHANGES IN YOUR PLANS JUST BECAU are called for jury duty, we will notify you as far in advance as	
If you have any questions, please call me at (520) 524-4178	Thank you for your good citizenship and cooperation.
Sincerely,	
Letter to the second se	••
	10000000000000000000000000000000000000
FROM:	STAMF

Juanita Mann Clerk of the Superior Court P.O. Box 668 Holbrook, AZ 86025