## Model COVID-19 Juror Pre-Selection Questionnaire

We understand participating in jury service is a hardship, particularly during the current coronavirus pandemic, but we need your assistance to continue to preserve our system of justice and the Constitutional right to trial by jury. To protect the health and safety of jurors summoned to serve during the pandemic, the [*Insert name of county*] County Circuit Court is using technology to allow some jurors to appear remotely for jury selection. We are also taking steps to assure that appropriate social distancing and cleaning practices, use of personal protective equipment and sanitizer, and other precautionary measures are adhered to during your service.

The questions below will help us assess your ability to participate in remote jury selection and enable us to communicate with you more efficiently. The judiciary is taking extraordinary steps to protect your health and safety while performing the essential function of providing access to the courts and the highest quality justice for the citizens of [*Insert name of county*] County during these extraordinary times.

## I. Technology Related Questions

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1.	Do you have access to a computer or internet device that allows you to communicate by voice AND video?  □ Yes □ No
2.	Do you have access to an internet or cellular connection that allows you to communicate by voice AND video?  ☐ Yes ☐ No
3.	If you answered yes to Question 1 and Question 2, what type of device do you have? Check all that apply:  □ Laptop Computer  □ Desktop Computer  □ Smartphone  □ Tablet  □ Other:
4.	Is that device available to be used in connection with your jury service?  □ Yes □ No
5.	Can you receive email on this device?  □ Yes □ No

6. What is the email address to which you would like information and links sent to y connection with your jury service?  (Please print legibly.)			
			7.
(Please print legibly.)			
8.	Can you receive text messages at this number?  □ Yes □ No		
9.	Would you prefer receiving information and links via the email provided above or text messages via the phone number provided above?   □ Email		
	☐ Text Messages (Data charges may apply depending on your plan.)		
10.	Are you familiar with any of the following videoconferencing tools? Check all that apply:    Zoom   Go-to-Meeting   Skype   Microsoft Teams   Jabber   StarLeaf   Other:		
11.	11. Do you have a private space in your home, that has internet access, from where you can participate in an official court proceeding without being interrupted or distracted?  □ Yes □ No		
	II. COVID-19 Related Questions		
1.	Do you possess any of the factors associated with increased risk due to COVID-19 (Examples: advanced age, serious underlying medical condition or illness, pregnant or breastfeeding)? $\hfill Yes \\ \hfill No$		

For more information please visit the website for the Center For Disease Control and Prevention: <a href="https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html">https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html</a>

2.	Do you reside with or are you caring for a person with any of the factors associated with increased risk due to COVID-19?     Yes
3.	□ No  Are you responsible for caretaking of children or others such as an ill relative, such that jury service would impose a substantial burden on you, your children, or another?
If	□ Yes □ No yes, please explain.
	Have you or has anyone in your household received a positive test for COVID-19?  □ Yes □ No
If	yes, when and whom?
5.	Are you currently experiencing any symptoms of COVID-19 (e.g., fever, sore throat, new loss of taste/smell, shortness of breath, cough)?  □ Yes □ No
	yes, what symptoms do you have and for how long have you been experiencing these mptoms?
6.	Have you been directed to quarantine or self-isolate?  □ Yes □ No
	yes, on what date were you told to quarantine or self-isolate and when were you told you could be quarantining or self-isolating?
7.	Are you willing to abide by any rules the Court instructs you to abide by regarding social distancing during trial if you are selected as a juror?  □ Yes □ No
8.	Are you willing to notify the Court immediately if, during jury selection or trial, you feel ill or test positive for COVID-19 or are in close proximity to anyone feeling ill or testing positive for COVID-19?  □ Yes □ No
9.	Are you or someone in your household a medical professional working in a medical setting treating and/or seeing COVID-19 patients?  □ Yes □ No
If	yes, please provide details.

## III. Optional For Cause Challenge Questions

[This section can be customized by the Court and attorneys/parties. For samples, see <u>New Hampshire's State Court Jury Trial Plan, at Appendix C; Sample Juror Questionnaire from Minnesota v. Bell; King County Questionnaire.</u>]

## IV. Catchall/Miscellaneous

1. Is there anything else that we should know in jury service remotely or attend court in-	about you that relates to your ability to participate person during the COVID-19 pandemic?
1 0 0 1	ion 1-109 of the Illinois Code of Civil Procedure, all the above questions are true and correct to the
Juror name (Please print legibly.)	
Juror signature	Date