

The Seventh Judicial District Court of the State of Idaho for Bingham County JURY SERVICE

Welcome to jury service. In accordance with Idaho Code §2-206 a certified jury list has been created. You have been selected at random from the certified jury list to attend court as a prospective juror. Your participation is vital and your contribution to this important process is appreciated!

INSTRUCTIONS for the QUALIFICATION FORM

1. YOU MUST COMPLETE, SIGN, AND RETURN THE JURY QUALIFICATION FORM (front and back) AND VOIR DIRE FORM WITHIN 10 DAYS FROM THE DATE THIS FORM WAS MAILED. PLEASE RETURN THE FORMS IN THE ENVELOPE PROVIDED, OR SUBMIT IT ELECTRONICALLY TO THE EMAIL BELOW.

Mail: Jury Commission, 501 N. Maple #205, Blackfoot, ID 83221

Attn: Rhonda Wixom - Jury Commissioner

Fax: (208)785-4131

E-Mail: rwixom@binghamid.gov

2. QUESTIONS, E-mail or leave a message at (208) 782-3157

3. Watch your mail during your qualified time for a Summons.

A Summons will be mailed telling you the date, time and courtroom to appear. As a courtesy, you will only receive a text message if you have opted in, letting you know if the trial you have been selected for is going forward or being canceled. **Provide your wireless provider** to ensure our computer program can send you the text message. You may also visit the Bingham County website at www.binghamid.gov and click on the UPCOMING JURY INFORMATION box at the bottom of the page.

The Summons will instruct you to call the recorded message the night before. It is your responsibility, as a potential juror, to be aware of the dates and times of your Summons.

GENERAL INFORMATION

4. Parents / Guardians may include pertinent information for a child who is away at school, in the military or serving religious obligations. Please sign and write your comments on the qualification form at the bottom of page 3 where indicated. Documentation is required.

A potential juror may be postponed but is not removed until credible documentation is received.

- 5. Have you moved from Bingham County? Please provide a copy of an updated driver's license, a copy of the 1st page of a rental or mortgage agreement, or a copy of your voter's registration card.
- 6. Your term is for four (4) months. During that time you may receive more than one summons.
- 7. Be on time and allow the entire day for your jury service. Do not bring children.

POSTPONEMENTS

Please note that whether to grant such a request is discretionary with the jury commissioner and/or judge. Any person requesting a postponement needs to provide a written statement explaining the reason for the request and the anticipated date that the reason will no longer exist. **Documentation is required**. All requests and documentation will be kept on file and all requested exemptions will be determined by the administrative district judge AFTER A POTENTIAL QUALIFIED JUROR RECEIVES THEIR SUMMONS.

OF THIS SEL	ECTION:	REPORTING NO:	JUROR QUALIFICATION FORM
EL YEAR:	PANEL NO		COMPLETE AND RETURN THIS FORM WITHIN 10 DAYS FROM THE DATE THIS FORM WAS MAILED
TE > >	QUESTIONNAIRE T	MONS FOR JURY DUTY, BUT A O DETERMINE WHETHER YOU ALL FOR FUTURE JURY DUTY.	J WILL FOR CLERK'S USE ONLY
	If you have any ques Office at (208) 782-3	tions contact the Jury Commissi 157.	oner's
			MAKE NAME AND/OR ADDRESS CORRECTIONS IN THIS AREA
r			
	o receive Jury notificat lumber		Email Addresservice Provider
<u>JUROI</u>	R QUALIFICATIO	ON QUESTIONNAIRE	
County	of	BINGHAM	
Juror nu	mber		
Term of	Service		
A requestion as a question show can avoiding	dance with Idaho Law ation is vital and your st to be EXCUSED or laho law provides that instructed shall be directly use for their failure to son who willfully mist or securing service as	POSTPONED from jury services any prospective juror who fails exted to appear before the clerk of the jurors who fail to appear as disappear as directed, and may also represents a material fact on this is a juror is guilty of a misdemean	to return this completed qualification questionnaire or the jury commissioner to complete the qualification rected shall be ordered by the Court to appear and be held in contempt of Court. qualification questionnaire for the purpose of nor.
Age:		Date of Birth:	
Residence	ce Address:		
City:		County:	Zip Code:
Mailing .	Address (if different the	han residence address):	
Name or	Residence Address C	orrections:	
One-way	Mileage to Jury Repo	orting Location:	
Email:		·	

Phone: Home _____ Work ____ Mobile _____

Mobile Carrier:

DISC	QUALIFIC	CATION from Jury Service. Please fill 'yes' if any apply to you, and 'no' for those that do not apply.			
Yes	No				
		I am a citizen of the United States of America.			
		I am a resident of BINGHAM County.			
		I am incapable by reason of a physical or mental disability, and with reasonable accommodation, o rendering satisfactory jury service. I will submit my physician's written statement certifying this condition to the jury commissioner.			
		I have been convicted of a felony, and I am presently on probation/parole or I have not been restored to the rights of citizenship pursuant to Idaho Code §18-310:			
	County please fi	County and state where felony conviction occured, if applicable (if you have not been convicted of a felony, please fill 'NA'):			
		I am unable to read, speak, and understand the English language.			
REQ reque	UEST TO est, and 'no	BE EXCUSED FROM CURRENT JURY SERVICE: Please fill 'yes' if any apply to your 'for those that do not apply.			
Yes	No				
*		I am 70 years of age or older and wish to be permanently excused. I will submit a written request to the jury commissioner to be reinstated to the county jury list at a later time if and when I wish to do so.			
		Within the past 24 months, I have served on a jury or answered a roll call for Idaho jury service in state court.			
	County a	and number of days served, if applicable (if you have not served within the past 24 months, please fill			
		Within the past 24 months I have served on an Idaho grand jury in state court.			
REQ!	UEST FO st, and 'no'	R POSTPONEMENT OF CURRENT JURY SERVICE: Please fill 'yes' if any apply to your for those that do not apply.			
Please	e note that	whether to grant such a request is discretionary with the jury commissioner and/or the judge.			
circur	nstances, a	at for postponement may be granted for the shortest period of time reasonable under the and the postponement must be to a time certain in the future at which time your name and juror placed in the next available jury panel and you will receive a new notice.			
Yes	No				
		I am a mother breastfeeding her child.			
		I have a temporary medical condition for which I ask to have my jury service postponed. I will submit a physician's written statement certifying this condition if requested by the court or jury commissioner.			
		I request postponement of current jury service based upon an undue hardship, extreme inconvenience, or public necessity.			
Reaso postpo	on for the ponement w	ostponement request and anticipated date (day/month/year) on which the reason for such ill no longer exist (if you are not requesting a postponement, please fill 'NA'):			
DECI	LARATIO	ON OF PROSPECTIVE JUROR:			
I certi willful	fy that the l misrepres	responses on this questionnaire form are true to the best of my knowledge and I understand that a sentation of a material fact may be punished as a misdemeanor.			
Dated	•				
Signe	d:				
Signed	d on behal	f of the prospective juror by:			
Reaso	n therefor:				

DATE OF THIS SELECTION:

Cell Phone Number ___

REPORTING NO:

PANEL YEAR:

PANEL NO:

I would like to receive Jury notification via: $\ \ \square$ Text $\ \ \square$ Email

Term of Service _____

WHEEL NO:

NOTE >> THIS IS NOT A SUMMONS FOR JURY DUTY, BUT A QUESTIONNAIRE TO DETERMINE WHETHER YOU WILL BE SUBJECT TO CALL FOR FUTURE JURY DUTY.

> If you have any questions contact the Jury Commissioner's Office at (208) 782-3157.

D:	JUROR QUALIFICATION FORM		
EEL NO:	COMPLETE AND RETURN THIS FORM WITHIN 10		
OUTY, BUT A ETHER YOU WILL	DAYS FROM THE DATE THIS FORM WAS MAILED TO THE CLERK OF THE DISTRICT COURT		
IURY DUTY.	FOR CLERK'S USE ONLY		
ry Commissioner's			
•			
	MAKE NAME AND/OR ADDRESS CORRECTIONS IN THIS AREA		
☐ Email Email Ad	Idress		
Wireless Service Pro	ovider		

SEVENTH JUDICIAL DISTRICT SUPPLEMENTAL VOIR DIRE QUESTIONNAIRE

Please complete all questions and return within 10 days.

Name:			
Martial Status: ☐ Single [☐ Married ☐ Separa	ated Divorced	□ Widowed
If married, Spouse's Name:			
Number of children, if any:			ted:
Occupation/Employer (If retired, f	ormer occupation):		
Spouse's Occupation/Employer (
YES □ NO □ Have you or any • If you answered Yes - plea	member of your immedi	ate family ever been	a party to a lawsuit?
Type of Lawsuit:	Where was lawsuit	t:	When:
 If you answered Yes - plea 	ase answer the following	•	
criminal action other than a traffic • If you answered Yes - plea		questions for each c	riminal action:
Type of Criminal Case:	Where was Crimin	ai Case: 	When:
YES □ NO □ Are you related • If you answered Yes - plea	17 4	/ member of law enfo	
DECLARATION OF PROSPECTI dire questionnaire are true to the misrepresentation of a material fa	best of my knowledge an	d I understand that a	
Signed:	Dat	ed:	
Signed on behalf of the prospective			
Reason therefor:			