STATE OF SOUTH CAROLINA				JUROR SUMMONS FOR CIRCUIT COURT							
COUNTY OF				FOR TERM BEGINNING WEEK OF:				JUROR NUMBER:			
You are hereby summoned to appear at on, at to answer this summons to serve as a (check applicable box) _ petit juror _ grand juror for the Court of Common Pleas and General Sessions. Failure to appear at the address above at the specified time may subject you to penalties as prescribed by law. CLERK OF COURT, Phone											
NAME AND ADDRESS OF JUROR				IMPORTANT INFORMATION AND INSTRUCTIONS							
NOTE: PERSO	Fill in the requested information in the "Juror Information Section" and the appropriate contact information below. After reading all of the conditions listed in the "Juror Response Section," mark any condition that applies to you. Separate the top and bottom portions of this page at the line indicated below and WITHIN THREE DAYS OF RECEIPT return the bottom portion of the form using the self-addressed envelope provided.										
Separate this top portion from bottom portion at the dotted line. Retain this top portion for your reference.											
			as instru		elf-ado	ressed envelope p	orovided.				
JUROR INFORMATION SECTION (PLEASE PRINT OR TYPE CLEARLY.) CITY, COUNTY, STATE OF BIRTH			AGE	BEGINNING OF:	FOR TERM BEGINNING WEEK OF: YEAR OF BIRTH # OF CHILDREN MAR			JUROR NUMBER: SINGLE	WIDOWED	DIVORCED	
YOUR OCCUPATION					DR FORMER EMPLOYER				WIDOWED	YEARS	
LEVEL OF FORMAL EDUCATION COMPLETED				NAME OF SPOUSE							
SPOUSE'S OCCUPATION			SPOUSE'	L E'S PRESENT OR FORMER EMPLOYER						YEARS	
			ER BEEN A	BEEN A PARTY TO A CIVIL LAWSUIT?							
CIVIL JURY, OR CRIMINAL JURY? IF SO, WHEN? HAVE YOU EV			ER BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC OFFENSE)? YES NO								
PHONE #	BUSINESS PHONE #	ALTERNATE PH	HONE #		EMER	TO OFFICERS C	E-MAIL A	DDRESS		((1) (1)	
SECTION written statements in the self-addressed envelope					rence and return the bottom portion of the form along with any required affidavits or provided. notifies you, you must report for jury duty as requested.						
	<u>EXEMPTIONS</u>										
DISQUALIFICATIONS ☐ I am not a U.S. citizen. ☐ I am not a resident of this county. (Note correct address above.) ☐ I cannot read, write, speak, or understand the English language. Translator's name and telephone #:				□ I am 65 years of age or older and wish to be excused. (If you do not wish to serve on a jury, you may telephone the clerk of court to be excused. Unless you are excused by the clerk of court prior to the term for which you are summoned, you must report for jury duty.) □ I am the primary caretaker of a disabled person or a person age 65 or older who							
☐ I have less than a sixth grade education or its equivalent. ☐ I have a mental or physical condition that prevents me from serving as a juror. (Doctor's statement required) ☐ I have been convicted in a state or federal court of a crime that carries a sentence of more than one year of imprisonment and I have not been pardoned or given amnesty for that conviction. List offenses, when and where convicted:				cannot care for himself.*** I have legal custody and duty of care of a child under the age of seven and I cannot provide adequate childcare while serving as a juror.*** I am a guard, keeper, employee, or other officer at a state penitentiary. I have served on a circuit court jury during the previous three calendar years, or I have served on a grand jury during the previous five calendar years. Date of Service: County: Jury Type: Circuit Court Grand Jury							
☐ I am a clerk of court, deputy clerk of court, constable, sheriff, commissioned law enforcement officer, probate judge, county commissioner, magistrate, or county officer, or I am employed within the walls of a courthouse. Occupation: ☐ I have served on a circuit court jury within this calendar year. Date of Service: County:				I am a student or a school employee and wish to be transferred to a later date that will not conflict with my school term. Date Available for Service: [When you return this form, you must also send evidence of school enrollment or employment.] ***An affidavit (notarized statement) must be returned with this form attesting to the above statements.							
I HAVE READ THE CONDITIONS FOR DISQUALIFICATION AND EXEMPTION ABOVE AND NONE OF THE CONDITIONS LISTED APPLY TO ME. NOTE: THE FURNISHING OF FALSE OR MISLEADING INFORMATION OR THE FAILURE TO FURNISH INFORMATION TO THE COURT MAY SUBJECT YOU TO PENALTIES AS PRESCRIBED BY LAW. YOUR SIGNATURE											
SCCA 235 (11/2016)	NOTE	:. Participation of all e	engible citizer	ns as jurors is enco	uraged.	ii you need specific acc	commodation:	s, courtnouse statt wi	ıı be avaılable f	ıur assistance.	