

IN THE UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF ILLINOIS - PEORIA DIVISION

DEAR JUROR:

IT WOULD BE GREATLY APPRECIATED IF YOU WOULD TAKE A FEW MINUTES TO COMPLETE THE FOLLOWING PETIT JUROR EXIT QUESTIONNAIRE. WE BELIEVE THAT INPUT FROM YOU BY COMPLETING THE FOLLOWING QUESTIONS WILL HELP US IMPROVE JURY SERVICE FOR OTHERS. YOUR RESPONSES ARE VOLUNTARY AND CONFIDENTIAL. YOU DO NOT HAVE TO SIGN YOUR NAME. IF NOT ENOUGH SPACE, PLEASE USE OTHER SIDE OF THIS FORM OR ATTACH AN ADDITIONAL SHEET. A SELF-ADDRESSED, POSTAGE-PAID ENVELOPE IS PROVIDED FOR YOUR CONVENIENCE.

1. HOW MANY DAYS DID YOU SPEND AT THE COURTHOUSE?____HOW MANY HOURS?_____
2. DID YOU HAVE ANY DIFFICULTY UNDERSTANDING THE PHONE MESSAGE ABOUT WHEN TO REPORT? YES____ NO_____
3. DURING THIS SESSION, ON HOW MANY CASES WERE YOU ACTUALLY SELECTED TO BE A JUROR FOR A TRIAL?_____
4. HOW MANY DAYS DID THE TRIAL(S) LAST? TRIAL #1____ TRIAL #2____ TRIAL #3____
5. HAVE YOU EVER SERVED ON JURY DUTY BEFORE? YES____NO____(HOW MANY TIMES?)____ STATE____ FEDERAL_____
6. PLEASE RATE THE FOLLOWING FACTORS AFFECTING YOUR JURY SERVICE:

	<u>VERY GOOD</u>	<u>GOOD</u>	<u>ADEQUATE</u>	<u>POOR</u>
A. INITIAL ORIENTATION	_____	_____	_____	_____
B. TREATMENT BY COURT				
PERSONNEL - COOPERATION	_____	_____	_____	_____
INFORMATION	_____	_____	_____	_____
COURTESY	_____	_____	_____	_____
C. PHYSICAL COMFORTS	_____	_____	_____	_____
D. PARKING FACILITIES	_____	_____	_____	_____
E. EATING FACILITIES	_____	_____	_____	_____
F. SCHEDULING OF YOUR TIME	_____	_____	_____	_____
G. CODE-A-PHONE SYSTEM	_____	_____	_____	_____

7. DID YOU LOSE INCOME AS A RESULT OF JURY SERVICE? YES____ NO_____
8. WHEN YOU WERE FIRST CALLED TO BE A JUROR WHAT WAS YOUR REACTION?
VERY POSITIVE____ POSITIVE____ NEUTRAL____ NEGATIVE_____
9. AFTER HAVING SERVED, WHAT IS YOUR IMPRESSION OF JURY SERVICE? (PLEASE CHECK ONE) MORE FAVORABLE____THE SAME____LESS FAVORABLE_____
10. DO YOU HAVE ANY SUGGESTION ON HOW JURY SERVICE MIGHT BE IMPROVED?

(you may continue on reverse if necessary)

THE FOLLOWING INFORMATION WILL HELP EVALUATE THE RESULTS AND RESPONSES TO THIS QUESTIONNAIRE.

AGE: 18-24() 25-34() 35-44() 45-54() 55-64() 65-Over()

SEX: FEMALE () MALE ()

OCCUPATION: _____

THANK YOU FOR COMPLETING THIS FORM