

GALLIPOLIS MUNICIPAL COURT

GALLIA COUNTY, GALLIPOLIS, OHIO

JUROR EXCUSE FORM

Name (please print) and
age: _____

Address: _____

Phone
Number: _____

I am claiming exemption from jury service for the following reason:

_____ Moved from Gallia County-my new address is above

_____ Physical inability to serve. ATTACH AN EXCUSE SIGNED BY YOUR DOCTOR.

_____ Recent death or serious illness of spouse or near relative. ATTACH
DETAILED EXPLANATION AND COMPLETED QUESTIONNAIRE.

_____ Member of a cloistered religious organization.

_____ Prior jury service in the past 12 months. Date of service: _____

_____ Student attending college outside Gallia County. ATTACH PROOF OF
REGISTRATION

_____ Convicted felon

_____ Age of 75 years or older

If you are applying for exemption of jury service this form plus your completed
questionnaire must be submitted and approved by the Judge of the Gallipolis
Municipal Court prior to the date of jury trial.

Date: _____ Signature: _____