

PETIT JUROR QUESTIONNAIRE

Your answer to the following questions will help improve jury service. All responses are voluntary and confidential. Thank you for your participation in this survey.

Please fill in the blanks, circle, or check (/) the appropriate response.

Date / /

	Poor	Fair	Good	Very Good	Excellent	Does Not Apply
1. Your Evaluation of the Facilities:						
a. The Juror Assembly Room						
1. Cleanliness	1	2	3	4	5	X
2. Physical Comfort	1	2	3	4	5	X
b. The Courtroom(s)						
1. Cleanliness	1	2	3	4	5	X
2. Physical Comfort	1	2	3	4	5	X
c. The Deliberation Room(s)						
1. Cleanliness	1	2	3	4	5	X
2. Physical Comfort	1	2	3	4	5	X
d. Restroom Facilities						
1. Cleanliness	1	2	3	4	5	X
2. Location / Accessibility	1	2	3	4	5	X
e. Signs to Juror Assembly Room						
	1	2	3	4	5	X
2. Your Evaluation of the Jury Program:						
a. Juror questionnaire / summons	1	2	3	4	5	X
b. Telephone call-in process	1	2	3	4	5	X
c. Check-in process (attendance)	1	2	3	4	5	X
d. Video presentation(s)	1	2	3	4	5	X
e. Orientation by court personnel	1	2	3	4	5	X
f. Available activities while waiting		1	2	3	4	5
X						
3. Evaluate the following personnel in terms of whether they acted in a professional, competent and courteous manner.						
	Poor	Fair	Good	Very Good	Does Not Excellent	Apply
a. Jury Management Office staff	1	2	3	4	5	X
b. Courtroom personnel	1	2	3	4	5	X
c. Sheriff-s officers / security staff	1	2	3	4	5	X
4. Your Evaluation of Other Factors:						
	Poor	Fair	Good	Very Good	Does Not Excellent	Apply
a. Juror parking facilities	1	2	3	4	5	X
b. Security at the courthouse	1	2	3	4	5	X
c. Availability of mass transit	1	2	3	4	5	X
d. Availability of refreshments	1	2	3	4	5	X
e. Directions to the courthouse	1	2	3	4	5	X
5. Did you drive to the courthouse?				Yes	No	

6. Please let us know any ways in which you believe that jury service can be improved.

7. What did you find positive about jury service? What did we do well?

8. Information on how your juror time was spent:

- a. How many days did you report to the courthouse, including today? _____ days
- b. Estimate the number of hours that you spent in the juror assembly area. _____ hours
- c. How many times were you selected to report to a courtroom for jury selection? _____ times
- d. How many times were you selected to serve as a juror for a trial? _____ times

9. Your occupational status at the time of your juror service (check only one box):

- employed self-employed not employed / retired homemaker full-time student

10. If you were employed at the time of your juror service:

- a. Did your employer pay your salary during your service? **Yes** **No**
- b. Did you lose income as a result of jury service? **Yes** **No**
- c. Were you required to change shifts or take similar action? **Yes** **No**

11. Have you served before as a juror?

- a. Served as a grand juror: **Yes** **No**
- b. Served as a petit juror (a trial juror): **Yes** **No**

12. How many years has it been since you last served as a juror -- petit or grand? _____ years

13. We appreciate any additional comments that you would like to make about your juror experience.

Thank you for your responses and your comments. They will assist our efforts to continue to improve juror service for the citizens of New Jersey.