

NAME: _____

COVID-19 SCREENING QUESTIONS FOR POTENTIAL GRAND JURORS

Please circle the appropriate answer or fill in the blank as indicated and return the completed questionnaire to the Clerk of Superior Court within ten (10) days of your scheduled date to report for service.

1. Please provide a mobile phone number which can be used to reach you: _____
2. What is an email address for you which you check regularly? _____
3. Have you or a family member been diagnosed with Covid-19? If yes, indicate the date of diagnosis and whether you or a family member are currently experiencing symptoms.
YES _____
NO _____
4. Are you or a member of your household a “vulnerable person?” If yes, indicate if the fvulnerable person is you and/or what family member. See definition below.
YES _____
NO _____
“Vulnerable Persons” are those individuals who are at increased risk for severe illness from the novel coronavirus as currently defined by the Centers for Disease Control and Prevention and the Georgia Department of Public Health as individuals who are over age 60 and individuals with serious underlying health conditions, such as high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised by chemotherapy or other treatments for medical conditions.”
5. Within the past ten days, have you experienced symptoms of COVID-19, including: cough, shortness of breath or difficulty breathing, fever above 100.4 degrees or a feeling of feverishness, chills, sore throat, new loss of taste or smell, fatigue, muscle or body aches, headache, congestion or runny nose, nausea or vomiting, or diarrhea? If yes, please list date and the symptoms.
YES _____
NO _____
6. Have you been in contact with someone known to have COVID-19 within the last 14 days?
YES _____
NO _____
7. Do you have children at home who require your direct supervision due to school and/or daycare closings? *Note: This applies if there is NO ONE else in the household who can provide care during jury service.*
YES _____
NO _____
8. Have you been tested for COVID-19, and what was the date and result of such test?
YES _____
NO _____
9. Do you feel ill, or have you taken any medication today for the purpose of reducing a fever? If yes, please explain.
YES _____
NO _____
10. Have you been on an airplane, train, or cruise ship within the last two weeks? If yes, indicate airline, rail line, and/or airline, where you traveled, and what dates.
YES _____
NO _____
11. Have you traveled out of the country within the last two weeks? If yes, indicate to which country you visited, your method of travel, and what dates.
YES _____
NO _____
12. Will you be able to wear a mask during Grand Jury proceedings? If not, please explain. **Please bring your own mask. If you do not have a mask, one will be provided to you.**
YES _____
NO _____

If you would like to review the Judicial Emergency Orders, see a court calendar, read about the types of courts in our circuit, or review a list of family resources in our community, please visit our circuit website at www.appalachiancourts.com. On our website, you will also find our court Twitter feed updates, which you can follow on Twitter @AppalachianCt for up-to-date information about our court system.