

Juror Excuse Statement

KAREN E. RUSHING Clerk of the Circuit Court and County Comptroller

Instructions: If you are automatically excused by law, or if you are requesting to be excused from jury service, please complete this form. This statement must be signed and may be: mailed to Karen E. Rushing, Clerk of the Circuit Court, Jury Services, P.O. Box 3079, Sarasota, FL 34230-3079; faxed to (941)-861-7738; or emailed to jurygroup@SarasotaClerkandComptroller.com. Unless you are contacted by the Court, your request for exemption under Section II or III has been granted. You must comply with the instructions and provide a telephone number.

Section I: Disgualification (Automatic Excuse)

	I am not a citizen of the United States.	I have been adjudicated incompetent with my competency rights not restored.
	I do not reside in Sarasota County. I do not possess a valid Florida Driver's license or identification card or have not requested to serve as a juror byaffidavit.	I am a convicted felon and my civil rights have not been restored.
		I am under prosecution for a crime.
Secti	ion II: Exemption (You may request to be excused.)	
	I am an expectant mother or a woman who has given birth within the 6 months before the reporting date.	I am 70 years of age or older, and wish to be permanently excused.
	I am a parent who is not employed full time, and have custody of a child under six years of age.	I am 70 years of age or older, and wish to be excused at this time.
	I am a person responsible for the care of another, incapable of caring for themselves.	I am a full time law enforcement officer, or among such entities' investigative personnel.
	I am permanently incapable of caring for myself and request a permanent excusal. (Must attach letter from physician to that effect.)	I have served as a juror in Sarasota County within the last 365 days
		I am a full-time student between the ages of 18-21.
Secti	ion III: Extreme Hardship	

Hardship Reason (*state reason*):

Section IV: Postponement

Requesting postponement until:	/ /	(Cannot exceed	6 months from date o	f original summons.)
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Under penalties of Perjury, I declare that I have read the foregoing juror postponement or excuse form and swear or affirm that the facts stated in it are true. (F.S. 92.525)

Signature (Required):					
Juror Name:	Report Date:				
Juror Number:	Where to Report: Sarasota Venice				
Phone (Home):	(Work):				