

## **CHATHAM COUNTY GENERAL EXCUSAL AFFIDAVIT FORM**

## \*\*Must be received at least five (5) days prior to your summons week.\*\*

JUROR'S PRINTED NAME:	WEEK SUMMONED:
JUROR REFERENCE NUMBER:	JUROR NUMBER ON SUMMONS:
The selection of the se	A CATAONA A CALIBRATA O CARACTERA DA LA MARIA TARACTERA DA LA
_	A. § 15-12-1.1 and the Jury Composition Rule, that: [check one]
LI I no longer reside in Chatham County, GA. My p	hysical address outside of Chatham County but within the US is:
☐ I am a <b>full-time student</b> attending classes at a co	ollege, university, vocational school, or other post-secondary school during
my summons week. <u>I have attached enrollment veri</u>	$\overline{\text{ification}}$ . I can serve the week of
to be excused.	
☐ I am <b>not a citizen of the United States</b> . I am a cit	izen of
Signature:	Date:
Daytime Phone Number:	
**The following require a notarized	signature. You must sign the form in front of a notary.**
I hereby affirm, in accordance with O.C.G.	A. § 15-12-1.1, that: [check one]
$\square$ I will be <b>70 years of age or older</b> during my summ	mons week <u>and</u> wish to be permanently exempted from jury service.
$\square$ I am the <b>primary caregiver of a child age 6 or yo</b>	ounger. I have active care and custody of said child and have no reasonably
available alternative childcare. I can serve the week	of [date] <b>OR</b> $\square$ I wish to be excused.
$\square$ I am the primary unpaid caregiver responsible for	or a person over the age of 6 with such physical or cognitive limitations that such
person is unable to care for themselves, cannot be I	eft unattended, and there is no reasonably available alternative for the care. I
have attached a statement from the person's docto	r affirming their need for care and request to be excused from jury service.
$\square$ I am presently on ordered <b>military duty</b> (or spou	ise of such service member) and have attached proof of active military status.
☐ I am a primary teacher in a home study program	n as defined in O.C.G.A.§ 20-2-690(c) with no reasonably available alternative for
the child or children. I can serve the week of	[date] <b>OR</b> $\square$ I wish to be excused.
Signature:	Date:
Daytime Phone Number:	
	<del></del>
Subscribed and sworn before me this	day of 20
	My Commission Expires:
(Notary Public Signature)	
Poturn to: Juny Services Room 427 Fuger	ne H. Gadsden Courthouse, 400 W. Oglethorpe Ave., Savannah, GA
31401; Fax: (912) 652-7130; E-mail: <u>juryser</u>	
-	eived and approved, call (912) 652-7170 or go to the eJuror
website: <a href="https://jury.chathamcountyga.gc">https://jury.chathamcountyga.gc</a>	<u>)v</u> .

Please call Jury Services at (912) 652-7170 if you have any questions. We are here to help!