

EXCUSE FROM JURY DUTY, #1

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[NAME AND ADDRESS, ex.

John Smith

1234 First Street

Suite 567

Anycity, Anystate 85245]

Dear [NAME, ex. John Smith],

I am in receipt of your letter of [DATE, ex. June 10, 1998]. Although I am honored by the privilege, I respectfully request that I be excused from jury duty.

[STATE REASON(S), ex. I am currently employed by ABC International Incorporated of Tempe. As a small firm, my employer will be unable to pay me during my absence for jury duty. Simply stated, my financial position will be severely affected as a result. I will be able to forward a statement from my employer if you so require.]

I trust that you understand my position and excuse me, thus, from jury duty. You may contact me at XXX-XXXX if there are any concerns.

Sincerely,

[YOUR NAME, ex. Jill Jones]

Your Name
Street Address
City, ST ZIP Code
Date

Recipient Name
Title
Organization Name
Street Address
City, ST ZIP Code

Dear Recipient Name:

I have been informed that I am required to be present at jury duty on Tuesday 27th November 2018. I want to serve the jury duty at the core of my heart but my life's problems are biggest obstacles in my way of serving. I have a 4 years old kid suffering from hepatitis. He needs my continuous attention and care.

Please respond me if you need additional documents in support of my excuse. I would like to thank you in advance. I will be waiting for your response.

I am looking forward to your response!

Sincerely,

Your Name

EXCUSE FROM JURY DUTY LETTER

Date: _____

To: _____

Dear _____,

I am the employer of _____ who has recently received a request from your office to serve as juror from

_____ to _____. I am writing this

letter to inform you that _____'s absence from work during the above said period would

I trust you understand that such absence would impose significant negative consequences. We respectfully request, thus, that he/she be excused from jury duty.

Please contact me if you have any concerns.

Sincerely,

[YOUR NAME, ex. Tony Montana]

Affidavit for Excuse or Deferral from Jury Duty

CHILD CARE GIVER

_____ County, Georgia

Juror Name: (Print name) _____

Juror Address: _____

Juror Telephone Number: _____

I hereby affirm that I am the **primary care giver** having active care and custody of a **child(ren) six years of age or younger** and that I have no reasonably available alternative child care and that I request to be excused or deferred from jury duty in accordance with O.C.G.A. §15-12-1 (a) (3).

This the _____ day of _____, 20_____.

Signature: _____

the ____ day of _____, 20__ .

Notary Public
My Commission Expires: _____

[Your letterhead, if desired; if not, your return address]

[Date of letter-month, day, and year]

[Recipient's first and last names]

[Company name]

[Street or P.O. box address]

[City, State ZIP code]

Dear [recipient's name]:

I have received notification that my presence is required at jury duty on Monday, September 6, 2010. Although I would be more than willing to serve and to fulfill my duty as a citizen under different circumstances, my life situation makes it impossible for me to serve. More specifically, I have three very young children, including a 4-month-old baby, and they require my constant attention and care. Therefore, I am contacting you to respectfully request that I be excused from jury duty.

Please respond to let me know whether you need additional information and whether your office has granted me an excuse from jury duty. Thank you in advance for considering this request. I look forward to hearing from you in the near future.

Sincerely,

[Signature]

[Sender's first and last names]

REQUEST FOR MEDICAL EXCUSE FROM JURY SERVICE

A.R.S. § 21-202

If a patient requests to be excused from jury service for reasons related to mental or physical conditions, Arizona law requires a written statement from a physician, physician assistant, or registered nurse practitioner ("RNP") licensed by the state of Arizona. If a prospective juror does not have a physician, physician assistant, or RNP, a professional caregiver may complete this form. The professional caregiver must be deemed acceptable by the court or jury commissioner for this purpose.

Some mental and physical problems do not warrant an excuse from service but may warrant a postponement. For any excuse that you provide, please be aware that you may be called to testify before the court about your representations regarding your patient's inability to perform jury service. ALL questions must be answered legibly. If not, this application will be considered incomplete and invalid.

Patient Name: _____ DOB: _____ Juror Badge No.: _____

Address: _____ State: _____ Zip Code: _____

Describe any mobility, physical or mental restrictions that make the prospective juror unfit for jury service:

List the specific symptoms that make this person unfit for jury service and state how long these symptoms have occurred:

When will this person be able to serve as a juror?: _____

Is the patient: employed, unemployed, retired?

Print Name of Physician, Physician Assistant, RNP, or Professional Caregiver:

Business Address: _____ State: _____ Zip Code: _____

Business Phone: _____ Specialty: _____

Physician License Number: _____ Physician Assistant License Number: _____

Nurse Practitioner Certificate Number: _____

I swear or affirm under penalty of perjury under the laws of the State of Arizona that the contents of this document are true and correct to the best of my knowledge and belief.

Signature of Physician, Physician Assistant, RNP, or Professional Caregiver _____ Date: _____

MEDICAL EXCUSE FROM JURY DUTY

BASED ON SERIOUS HEALTH CONDITION

Patient Details

Patient name: [NAME]

DOB: [DATE OF BIRTH]

Patient Address: [ADDRESS]

Scheduled to appear for jury duty on: [DATE]

RE: Jury Duty

Dear Doctor [SURNAME],

The patient identified above is scheduled for jury duty on the dates indicated above. Serving one's community as a juror is a fundamental obligation of all citizens and is the bedrock upon which our system of justice is based. In order to participate as a juror, an individual generally must be able to do the following:

- Appear in person at the courthouse;
- Cognitively be able to receive and evaluate information that is presented during the proceeding; and
- Sit quietly during the proceeding, for periods of approximately two hours without a break, which may continue the entire day (and some trials may last more than one day).

Individuals who believe they are unable to successfully participate in jury duty due to their health condition(s) must have their physician certify that a serious health condition prevents them from fulfilling their legal obligation to appear for jury duty.

Please note, we are not requesting any specific details about an individual's health or medical condition(s). Please do not provide medical records or medical information.

Please complete the certification below:

I hereby swear and affirm that the individual identified above is my patient, and that he/she has a serious medical condition at the present time that prevents him/her from being able to appear for jury duty. The duration of this serious medical condition is (please select one):

- Permanent: jury service in the future will not be possible.
- Temporary: jury service in the future may be possible at an estimated date of [insert estimated date].

If you have approved this patient to go to work, please explain why it would be more detrimental for him/her to serve on the jury than to go to work:

[Your Name]
[Company Name]
[Address]
[City, State, Zip]

[Date of Letter]

[Recipient's Name]
[Title]
[Company Name]
[Address]
[City, State, Zip]

Subject: Juror #____ Requests Deferral from Jury Duty service.

Dear [Recipient's name],

I am writing this letter to request to be excused from jury duty on ____/
____/_____ because I am a full time mother of a six month year old son.

Making babysitting arrangements is not possible due to not being able to afford child care at this time.

Please put my name back in the lottery, I would be glad to serve on a jury at a future date.

I appreciate your understanding of my situation. Please contact me at the above phone number if you have any further questions.

Thank you,

[Sign here]

[Date]

[NAME AND ADDRESS, ex.

Tom Atkinson

14 Edith Street,

Hackney West,

ZIP POST CODE]

Dear [NAME, ex. Tom Atkinson],

I am in receipt of your letter of [DATE, ex. June 10, 1998]. Although I am honored by the privilege, I respectfully request that I be excused from jury duty.

[STATE REASON(S), ex. I am currently employed by ABC International Incorporated of Tempe. As a small firm, my employer will be unable to pay me during my absence for jury duty. Simply stated, my financial position will be severely affected as a result. I will be able to forward a statement from my employer if you so require.]

I trust that you understand my position and excuse me, thus, from jury duty. You may contact me at XXX-XXXX if there are any concerns.

Sincerely,

[YOUR NAME, ex. John Doe]

MEDICAL EXCUSE

Patient Name:

General Excuse from Jury Service

Please excuse the above named patient from federal jury duty.

Due to:

it is medically advisable that the patient refrain from this type of service.

If this patient is employed please explain why it would be more detrimental to them to serve on the jury than their normal employment.

Temporary Excuse from Jury Service

Due to: _____

Please provide date when available to serve as a juror _____.

If you have any additional questions regarding this matter, please do not hesitate to call the Jury Office. 716-332-1721

Name of Physician:

Telephone number:

Office Address:

Jury Duty Summons Excuse Letter Template

(Date)

Jury Administration

XXXXXXXXXXXXXX

Chicago, Illinois 606xx

Dear Sir or Madame,

I received a summons to Jury Duty for (date). I am requesting an exemption from Jury Duty because I am breastfeeding my infant. Per Illinois Public Act 094-0391 Section 10.3: Any mother nursing her child shall, upon request, be excused from jury service.

I would be happy to serve on a jury in the future but am unable to do so at this time. I appreciate your understanding of my situation, and await your response to my request. Please contact me at (773) xxx-xxxx if you have any further questions or if I need to provide further material.

Thank you,

(signature)

(name)

(address)

24th January, 2013

Tom Kinston
14 East Street
New York

Dear Tom Kinston,

I am in receipt of your letter of January 10, 2013. Although I am honored by the privilege, I respectfully request that I be excused from the jury duty.

I am currently employed by XYZ International Inc. As a small firm, my employer will be unable to pay me during my absence for jury duty. Simply stated, my financial position will be severely affected as a result. I will be able to forward a statement from my employer if you so require.

I trust that you understand my position and excuse me, thus, from jury duty. You may contact me at 12345678 if there are any concerns.

Sincerely,
L. Smith

[Your letterhead, if desired; if not, your return address]

[Date of letter-month, day, and year]

[Recipient's first and last names]

[Company name]

[Street or P.O. box address]

[City, State ZIP code]

Dear [recipient's name]:

I have received notification that my presence is required at jury duty on Monday, September 6, 2010. Although I would be more than willing to serve and to fulfill my duty as a citizen under different circumstances, my life situation makes it impossible for me to serve. More specifically, I have three very young children, including a 4-month-old baby, and they require my constant attention and care. Therefore, I am contacting you to respectfully request that I be excused from jury duty.

Please respond to let me know whether you need additional information and whether your office has granted me an excuse from jury duty. Thank you in advance for considering this request. I look forward to hearing from you in the near future.

Sincerely,

[Signature]

[Sender's first and last names]