

JUROR COVID-19 SCREENING

(A CDC Form - <https://www.cdc.gov>)

Jury Trial: _____

<p>Juror # _____</p> <p>Note: Complete survey within 48 hours of the jury trial date.</p>	<p>PLEASE CIRCLE THE ANSWER THAT APPLIES TO YOU</p>	
<p>1. Have you experienced any of the following symptoms in the past 48 hours?</p> <ul style="list-style-type: none"> • fatigue, fever or chills • cough, shortness of breath or difficulty breathing • muscle aches, body aches, headache or sore throat • congestion or runny nose • nausea, vomiting or diarrhea • new loss of taste or smell 	<p>YES</p>	<p>NO</p>
<p>2. Are you isolating or quarantining because you tested positive for Covid-19, or are worried that you may be sick with Covid-19?</p>	<p>YES</p>	<p>NO</p>
<p>3. Have you been in close physical contact in the last 5 days with:</p> <ul style="list-style-type: none"> • Anyone who is known to have laboratory-confirmed Covid-19? • Anyone who has any symptoms consistent with Covid-19? 	<p>YES</p>	<p>NO</p>
<p>4. Are you currently waiting on the results of a Covid-19 test?</p> <p>IMPORTANT: ANSWER "NO" IF YOU ARE WAITING ON THE RESULTS OF A PRE-TRAVEL OR POST-TRAVEL COVID-19 TEST</p>	<p>YES</p>	<p>NO</p>
<p>5. Have you traveled in the past 10 days?</p> <p>Travel is defined as any trip that is overnight and on public transportation (plane, train, bus, Uber, Lyft, cab, etc.) or any trip that is overnight and with people who are not in your household.</p>	<p>YES</p>	<p>NO</p>
<p>I certify that my responses are true and correct.</p> <p>Print Name _____</p> <p>Signature _____ Date _____</p>		
<p>Instructions on back (following page).</p> <p>If you have questions, please call 972-721-2740 or email CourtQuestions@cityofirving.org.</p>		

Juror Screening Instructions

1. Complete survey within **48 hours** of the jury trial date (on summons).
2. If you answered “**NO**” to all questions, then please appear.
3. If you answered “**YES**” to at least one, then sign, date and return to the Irving Municipal Court via fax, mail or email. Your survey will be presented to the Judge. Please **do not appear** at court because your date will be reset (notified by mail with another summons).

Fax: 972-721-2389

Mail: Irving Municipal Court, P.O. Box 152288, Irving, TX 75015

Email: CourtQuestions@cityofirving.org