

**FOURTH JUDICIAL DISTRICT COURT
FORM B**

REQUEST FOR (SHORT TERM) EXCUSAL

Note: Please use this form to request jury service excusals for days that you may have medical appointments, scheduled vacations, work related travel etc. (Do not use this form to request permanent 6-month term excusal requests)

NAME: _____
ADDRESS: _____
PHONE NUMBERS: Hm: _____ Wk: _____
Cell: _____ Message: _____
DATES REQUESTED FOR EXCUSAL: _____
REASON FOR EXCUSAL: _____

(Please attach supporting documents, i.e., flight plans or itinerary, doctor's notes, etc.)

Signature: _____ Date: _____

(Office Use Only)

Received by: Jury Clerk Date: _____

_____ Excusal Granted
_____ Excusal Denied

_____ Date: _____

Judge's Signature

Juror Contacted: Date: _____ By: _____, Jury Clerk