

JUROR QUESTIONNAIRE FOR CIVIL CASES

General Questions

PLEASE PRINT ALL ANSWERS LEGIBLY

FULL NAME: _____

1. DATE AND PLACE OF BIRTH: _____

2. YOUR SEX: MALE FEMALE

3. ARE YOU: AFRICAN-AMERICAN ASIAN/PACIFIC
 HISPANIC/MEXICAN-AMERICAN OTHER
 WHITE/CAUCASION

4. WHAT IS YOUR ETHNIC BACKGROUND OR NATIONALITY (E.G., ENGLISH, IRISH, FRENCH, ITALIAN, CHINESE, MEXICAN, RUSSIAN, ETC.?) _____

5. STATE YOUR PRESENT MARITAL STATUS:

MARRIED _____	HOW LONG? _____
SINGLE _____	HOW LONG? _____
SEPARATED OR DIVORCED _____	HOW LONG? _____
WIDOWED _____	HOW LONG? _____
PARTNERED _____	HOW LONG? _____

6. AREA, NEIGHBORHOOD, OR COMMUNITY IN THIS COUNTY WHERE YOU CURRENTLY LIVE (DO NOT GIVE YOUR ADDRESS):

HOUSE APARTMENT OWN RENT

7. AREA, NEIGHBORHOOD, OR COMMUNITY WHERE YOU HAVE LIVED IN THE PAST 10 YEARS (AND DATES):

8. WHAT IS THE HIGHEST LEVEL OF EDUCATION YOU COMPLETED?

- | | |
|--|---|
| <input type="checkbox"/> GRADE SCHOOL OR LESS | <input type="checkbox"/> SOME COLLEGE
(MAJOR): _____ |
| <input type="checkbox"/> SOME HIGH SCHOOL | <input type="checkbox"/> COLLEGE GRADUATE
(MAJOR): _____ |
| <input type="checkbox"/> HIGH SCHOOL GRADUATE | <input type="checkbox"/> POSTGRADUATE STUDY
(MAJOR): _____ |
| <input type="checkbox"/> OTHER (PLEASE EXPLAIN:

_____ | <input type="checkbox"/> TECHNICAL, VOCATIONAL, OR BUSINESS
SCHOOL
(MAJOR): _____ |

9. IF YOU PLAN TO ATTEND OR ARE CURRENTLY ATTENDING SCHOOL, DESCRIBE:

10. IF YOU HAVE TAKEN ANY COURSES OR HAD ANY TRAINING IN MEDICINE, PSYCHOLOGY OR OTHER HEALTH CARE FIELD, DESCRIBE:

11. IF YOU HAVE TAKEN ANY COURSES OR HAD ANY TRAINING IN LAW OR A RELATED SUBJECT, DESCRIBE:

all?

12. EDUCATIONAL BACKGROUND OF ANY OTHER ADULT WHO LIVES IN YOUR HOME, INCLUDING ANY DEGREES OR CERTIFICATES EARNED

13. YOUR PRESENT EMPLOYMENT STATUS (CHECK ALL THAT APPLY):

- | | | |
|---|----------------------------------|---|
| <input type="checkbox"/> EMPLOYED FULL-TIME | <input type="checkbox"/> RETIRED | <input type="checkbox"/> UNEMPLOYED, LOOKING FOR WORK |
| <input type="checkbox"/> EMPLOYED PART-TIME | <input type="checkbox"/> STUDENT | <input type="checkbox"/> UNEMPLOYED, NOT LOOKING FOR WORK |
| <input type="checkbox"/> HOMEMAKER | | |

14. YOUR CURRENT OR MOST RECENT OCCUPATION:

15. NAME OF YOUR CURRENT OR MOST RECENT EMPLOYER OR, IF A STUDENT, YOUR SCHOOL:

16. WHAT ARE YOUR SPECIFIC DUTIES AND RESPONSIBILITIES ON THE JOB?

17. DOES YOUR JOB INVOLVE SUPERVISING OTHER PEOPLE: YES NO

IF YES, APPROXIMATELY HOW MANY? _____

18. ARE YOU INVOLVED IN THE HIRING OR FIRING OF OTHER EMPLOYEES? YES NO

19. ARE YOU INVOLVED IN EVALUATING THE JOB PERFORMANCE OF OTHER EMPLOYEES?

YES NO

20. PLEASE CHECK THE RANGE OF ANNUAL INCOME IN YOUR HOUSEHOLD:

- | | |
|--|---|
| <input type="checkbox"/> \$10,000 OR LESS | <input type="checkbox"/> \$61,000 - \$100,000 |
| <input type="checkbox"/> \$11,000 - \$30,000 | <input type="checkbox"/> OVER \$100,000 |
| <input type="checkbox"/> \$31,000 - \$60,000 | <input type="checkbox"/> OVER \$200,000 |

21. ALL OTHER FULL-TIME EMPLOYMENT YOU HAVE HAD (AND FOR HOW LONG):

22. ALL EMPLOYMENT OF YOUR SPOUSE/SIGNIFICANT OTHER (AND FOR HOW LONG):

23. WHAT ARE/WERE THE OCCUPATIONS OF YOUR PARENTS? (IF RETIRED, WHAT DID THEY DO BEFORE?)

MOTHER: _____

FATHER: _____

24. HAVE YOU OR ANYONE CLOSE TO YOU EVER OWNED OR MANAGED A BUSINESS OR SERVED ON A BOARD OF DIRECTORS? YES NO

IF YES, HOW MANY EMPLOYEES DID THE BUSINESS HAVE? _____

IF YES, PLEASE EXPLAIN, AND STATE WHETHER THERE WERE EVER ACCUSATIONS OF IMPROPER SEXUAL CONDUCT BY AN EMPLOYEE OF THAT BUSINESS OR ORGANIZATION: _____

regarding whom other employees

25. HAVE YOU HAD ANY SPECIAL TRAINING, EDUCATION, OR EXPERIENCE, IN ANY OF THE FOLLOWING AREAS?

- | | | | | |
|-----------------------------------|--------------------------|-----|--------------------------|----|
| MANAGEMENT | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| SOCIAL WORK/COUNSELING/PSYCHOLOGY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| CLERGY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| ? [THEOLOGY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| PHILOSOPHY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| EDUCATION | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| CHILD CARE | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| OTHER WORK WITH CHILDREN | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |

IF YES TO ANY OF THE ABOVE, PLEASE EXPLAIN: _____

26. IF YOU HAVE CHILDREN, PLEASE LIST (INCLUDING ANY CHILDREN WHO DO NOT CURRENTLY LIVE WITH YOU):

<u>SEX</u>	<u>AGE</u>	<u>DOES CHILD LIVE WITH YOU</u>	<u>EDUCATION</u>	<u>OCCUPATION</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

27. IF YOU OR YOUR CURRENT SPOUSE/SIGNIFICANT OTHER HAS EVER SERVED IN THE MILITARY, PLEASE LIST FOR EACH THE BRANCH OF SERVICE AND DATES OF SERVICE: _____

28. WHAT SOCIAL, CIVIC, PROFESSIONAL, TRADE, OR OTHER ORGANIZATIONS ARE YOU AFFILIATED WITH?

29. DESCRIBE ANY OFFICES YOU HAVE HELD IN ORGANIZATIONS LISTED ABOVE: _____

30. HAVE YOU OR ANYONE CLOSE TO YOU EVER ATTENDED A SCHOOL AFFILIATED WITH AN ORGANIZED RELIGION?

YES NO

WHAT SCHOOL(S)? _____

WHAT RELIGION WAS IT AFFILIATED WITH? _____

HOW MANY YEARS DID YOU/THEY ATTEND? _____

2 } WHY DID YOU/THEY ATTEND A PRIVATE SCHOOL? _____

2 } 31. DO YOU SPEAK ANY LANGUAGES OTHER THAN ENGLISH? YES NO

IF YES, WHICH LANGUAGES: _____

3 } 32. HAVE YOU EVER WORKED OR DONE ANY VOLUNTEER WORK FOR ANY NON-PROFIT OR CHARITABLE ORGANIZATION? YES NO

IF YES, PLEASE EXPLAIN: _____

33. WHAT ARE YOUR HOBBIES, MAJOR INTERESTS, RECREATIONAL PASTIMES, AND SPARE-TIME ACTIVITIES?

34. HOW WOULD YOU DESCRIBE YOURSELF IN TEN WORDS? _____

35. DO YOU KNOW ANYONE ON THIS JURY PANEL? _____

36. DURING THE TRIAL, THE FOLLOWING WITNESSES MAY BE CALLED TO TESTIFY. PLEASE LOOK OVER THE LIST AND CIRCLE ANY NAME YOU KNOW PERSONALLY. AT THE END OF THE LIST, PLEASE INDICATE YOUR RELATIONSHIP TO ANY OF THE POTENTIAL WITNESSES.

INSERT WITNESS HERE

37. ON HOW MANY CASES HAVE YOU SERVED ON A JURY? _____

WHERE DID YOU SERVE ON A JURY? _____

WHAT KIND OF CASES DID YOU HEAR WHILE SERVING ON A JURY? _____

IN HOW MANY OF THOSE CASES DID THE JURY REACH A VERDICT? _____

IN HOW MANY OF THOSE CASES DID YOU SERVE AS THE JURY FOREPERSON? _____

WAS YOUR JURY SERVICE A POSITIVE OR NEGATIVE EXPERIENCE? _____

38. DO YOU PERSONALLY KNOW ANY JUDGES OR ATTORNEYS OR COURT PERSONNEL? YES NO

IF YOU PERSONALLY KNOW ANY JUDGES OR ATTORNEYS OR COURT PERSONNEL, WHAT ARE THEIR NAMES AND RELATIONSHIP TO YOU?

39. HAVE YOU OR ANYONE CLOSE TO YOU EVER MADE A CLAIM FOR MONEY DAMAGES? YES NO

IF YOU OR ANYONE CLOSE TO YOU HAS EVER MADE ANY TYPE OF CLAIM FOR MONEY DAMAGES, EXPLAIN:

40. HAVE YOU OR ANYONE CLOSE TO YOU EVER HAD A CLAIM FOR MONEY DAMAGES MADE AGAINST YOU?
 YES NO

IF A CLAIM FOR MONEY DAMAGES HAS EVER BEEN MADE AGAINST YOU OR ANYONE CLOSE TO YOU, EXPLAIN THE CIRCUMSTANCES:

41. HAVE YOU OR ANYONE CLOSE TO YOU EVER SUED OR BEEN SUED? YES NO

IF YOU OR ANYONE CLOSE TO YOU HAS EVER SUED OR BEEN SUED IN ANY TYPE OF LAWSUIT, EXPLAIN:

42. IF YOU HAVE EVER BEEN TO COURT FOR ANY OTHER REASON, EXPLAIN:

43. WHAT DO YOU THINK ABOUT PEOPLE WHO BRING LAWSUITS? _____

44. IF YOU THOUGHT YOU WERE INJURED BECAUSE OF THE FAULT OF SOMEONE ELSE, WOULD YOU CONSIDER BRINGING A LAWSUIT? YES NO

PLEASE EXPLAIN: _____

45. HOW DO YOU FEEL ABOUT AWARDING MONEY DAMAGES TO AN INJURED PERSON FOR EMOTIONAL DISTRESS, ANXIETY, OR LOSS OF ENJOYMENT OF LIFE? _____

46. HOW CLOSELY DO YOU FOLLOW THE NEWS ON EITHER RADIO, TV OR IN THE NEWSPAPERS?

- SEVERAL TIMES A DAY
- ONCE A DAY
- SEVERAL TIMES A WEEK
- OCCASIONALLY/ALMOST NEVER

47. WHAT KIND OF TELEVISION PROGRAMS DO YOU USUALLY WATCH? _____

WHAT NEWSPAPERS AND MAGAZINES DO YOU READ REGULARLY OR OCCASIONALLY? _____

48. WHAT IS YOUR PRIMARY SOURCE OF NEWS? _____

49. HAVE YOU OR ANYONE CLOSE TO YOU HAD A PROBLEM INVOLVING ALCOHOL, DRUGS, OR PRESCRIPTION DRUGS? YES NO

IF YES, PLEASE EXPLAIN: _____

50. TO WHAT EXTENT DO YOU TRUST THE JUDGEMENT OF MENTAL HEALTH PROFESSIONALS IN DIAGNOSING PEOPLES' PROBLEMS?

- QUITE A BIT
- SOMEWHAT
- NOT TOO MUCH

51. THESE CASES INVOLVE CLAIMS OF SEXUAL ABUSE AGAINST A CATHOLIC PRIEST, AND A CLAIM AGAINST A ROMAN CATHOLIC ARCHBISHOP OF LOS ANGELES, A CALIFORNIA CORPORATION SOLE, FOR NEGLIGENTLY SUPERVISING THE PRIEST.

IN WHAT RELIGION WERE YOU RAISED, IF ANY? _____

yes
6/1
62

WHAT DENOMINATION/CONGREGATION HAVE YOU BELONGED TO IN THE LAST 10 YEARS? _____

HOW OFTEN DO YOU ATTEND SERVICES? _____

52. WOULD YOUR RELIGIOUS AFFILIATION MAKE IT DIFFICULT FOR YOU TO SIT AS A JUROR IN THIS CASE?

YES NO

IF YES, PLEASE EXPLAIN: _____

53. HOW IMPORTANT WOULD YOU SAY RELIGION IS IN YOUR LIFE?

VERY IMPORTANT OF LITTLE IMPORTANCE

SOMEWHAT IMPORTANT NOT AT ALL IMPORTANT

54. HOW IMPORTANT WOULD YOU SAY RELIGION IS IN YOUR SPOUSE/SIGNIFICANT OTHER'S LIFE?

VERY IMPORTANT OF LITTLE IMPORTANCE

SOMEWHAT IMPORTANT NOT AT ALL IMPORTANT

55. DO OTHER MEMBERS OF YOUR FAMILY (SPOUSE, PARENTS, SISTERS AND BROTHERS, CHILDREN) PRACTICE RELIGIONS DIFFERENT FROM YOURS?

YES NO

IF YES, PLEASE STATE THE PERSON'S RELATIONSHIP TO YOU AND THEIR RELIGION: _____

56. HAVE YOU OR ANYONE CLOSE TO YOU EVER RECEIVED TRAINING (IN THEOLOGY OR RELIGION)?

YES NO

IF YES, PLEASE EXPLAIN: _____

57. DO YOU KNOW ANYONE WHO HAS REGULAR CONTACT WITH ANY CATHOLIC DIOCESE OR ORDER OTHER THAN BEING A PARISHIONER OR ATTENDING RELIGIOUS SERVICES?

YES NO

IF YES, PLEASE EXPLAIN: _____

same?

58. HAVE YOU OR ANYONE IN YOUR IMMEDIATE FAMILY EVER PARTICIPATED IN ANY RELIGIOUS GROUPS, PROGRAMS OR TRAININGS (E.G. BIBLE STUDY, CATHOLIC SCHOOL, YOUTH GROUPS, CHURCH TRIPS, ETC.)?

YES NO

IF YES, PLEASE EXPLAIN: _____

59. HAVE YOU OR ANYONE IN YOUR IMMEDIATE FAMILY EVER GONE TO SCHOOL TO BECOME A PRIEST, NUN OR MINISTER, OR SERIOUSLY CONSIDERED DOING SO?

YES NO

IF YES, PLEASE EXPLAIN: _____

60. HAVE YOU OR ANONE CLOSE TO YOU EVER BEEN EMPLOYED BY A CHURCH, TEMPLE, MOSQUE OR OTHER PLACE OF WORSHIP:

YES NO

IF YES, PLEASE EXPLAIN: _____

61. WERE YOU EVER A MEMBER OF THE CATHOLIC FAITH? YES NO

IF YES, PLEASE EXPLAIN: _____

62. DO YOU HAVE CHILDREN WHO ARE OR WERE MEMBERS OF THE CATHOLIC FAITH?

YES NO

IF YES, PLEASE EXPLAIN: _____

63. HAVE YOU OR ANYONE IN YOUR FAMILY EVER BEEN ANY OF THE FOLLOWING?

- | | | | | |
|-----------------------|--------------------------|-----|--------------------------|----|
| PASTOR | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| PRIEST | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| LAY PREACHER/DEACON | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A STUDENT OF THEOLOGY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A MINISTER | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A MISSIONARY | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A CHURCH EMPLOYEE | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A CHURCH LEADER | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A CHURCH VOLUNTEER | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |
| A LECTOR | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO |

see 20
missions
see 51-56

IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE EXPLAIN: _____

IN WHAT RELIGIOUS ORGANIZATION? _____

64. HAVE YOU, ANY FAMILY MEMBER OR FRIEND EVER BEEN AN ALTAR BOY OR ALTAR SERVER?

YES NO

IF YES, WHO, AT WHAT CHURCH AND HOW LONG? _____

65. PLEASE STATE WHETHER OR NOT YOU BELONG TO ANY OF THE FOLLOWING ORGANIZATIONS:

- CHRISTIAN COALITION ORDER OF DEMOLAY
 MASONS ORDER OF EVENING STAR
 KNIGHTS OF COLUMBUS ANY OTHER ASSOCIATIONS WITH A RELIGIOUS ORGANIZATION
 OPUS DEI

66. HOW OFTEN DO YOU READ THE BIBLE?

EVERY DAY ONCE A WEEK SELDOM NEVER

HOW OFTEN DOES YOUR SPOUSE/SIGNIFICANT OTHER READ THE BIBLE?

EVERY DAY ONCE A WEEK SELDOM NEVER

IF YOU HAVE INDICATED A MEMBERSHIP OR BELIEF IN ANY RELIGIOUS ORGANIZATION, PLEASE ANSWER THE FOLLOWING QUESTIONS:

IF YOU HAVE BEEN A MEMBER OF A CHURCH DURING THE PAST TWENTY YEARS, PLEASE INDICATE THE NAME AND LOCATION OF THAT CHURCH? _____

IF YOU HAVE INDICATED A MEMBERSHIP OR AFFILIATION WITH A PARTICULAR RELIGIOUS FAITH, PLEASE CHECK THE STATEMENT WHICH BEST DESCRIBES YOUR LEVEL OF ACTIVITY:

- NEVER ATTEND ATTEND SERVICES ON A REGULAR BASIS
 ALMOST NEVER ATTEND IN ADDITION TO ATTENDING SERVICES, I AM ACTIVELY INVOLVED IN THE SERVICES AND/OR MANAGEMENT OF THE ORGANIZATION
 ATTEND SERVICES TWO OR THREE TIMES PER YEAR

68. DO YOU WATCH RELIGIOUS PROGRAMMING? YES NO

IF YES, WHICH PROGRAMS? _____

DO YOU CONTRIBUTE OR DONATE TO ANY OF THE RELIGIOUS MINISTRIES ON THESE PROGRAMS?

YES NO

69. DO YOU, YOUR SPOUSE/SIGNIFICANT OTHER, OR ANY MEMBER OF YOUR FAMILY MAKE REGULAR FINANCIAL CONTRIBUTIONS TO YOUR CHURCH OR RELIGIOUS ORGANIZATION? YES NO

70. HAVE YOU OR ANYONE CLOSE TO YOU (FRIEND OF FAMILY) EVER BEEN EMPLOYED OR PERSONALLY CONNECTED IN ANY CAPACITY TO ANY OF THE FOLLOWING EMPLOYERS?

Sub 60

ARCHDIOCESE OF LOS ANGELES YES NO

ANY CATHOLIC DIOCESE YES NO

ANY OTHER DIOCESAN-OPERATED INSTITUTIONS YES NO

IF YOU ANSWERED YES TO ANY OF THE ABOVE, PLEASE DESCRIBE IN WHAT CAPACITY AND THE NAME OF THE DIOCESE IF NOT LOS ANGELES: _____

WHAT WERE THE DATES OF SUCH CONNECTION TO ANY OF THE ABOVE? _____

71. HAVE YOU HEARD OR READ ABOUT SETTLEMENTS OF SEXUAL ABUSE CLAIMS WITH ANY CATHOLIC DIOCESE OR ORGANIZATION IN CALIFORNIA?

YES NO

IF YES, PLEASE EXPLAIN: _____

HOW DO YOU THINK YOUR KNOWLEDGE OF THESE SETTLEMENTS WILL AFFECT YOU IF YOU ARE ASKED TO SIT AS A JUROR IN A CASE AGAINST A DIOCESE INVOLVING CLAIMS OF SEXUAL ABUSE? _____

72. DO YOU THINK THERE SHOULD BE LIMITS ON THESE KINDS OF LAWSUITS?

YES NO

IF YES, PLEASE EXPLAIN: _____

73. DO YOU BELIEVE CHURCHES SHOULD BE IMMUNE FROM SUCH LAWSUITS?

YES NO

IF YES, PLEASE EXPLAIN: _____

74. DO YOU BELIEVE JUDGING OTHERS OR AWARDED MONEY ARE AGAINST BIBLICAL PRINCIPALS OR RELIGIOUS TEACHING? YES NO

IF YES, PLEASE STATE YOUR VIEWS: _____

broader - any cases with judge credibility or awards

to all parties in this case

75. GIVEN WHAT YOU HAVE SEEN, READ, OR HEARD, DO YOU HAVE ANY CONCERN THAT YOU MIGHT NOT BE ABLE TO BE FAIR IN A CATHOLIC CHURCH ABUSE CASE?

YES NO UNSURE

IF YES, PLEASE EXPLAIN: _____

*is it your
this case
involves
sum?
protection?*

76. HOW SERIOUS A PROBLEM DO YOU THINK CHILD SEX ABUSE IS IN THE UNITED STATES TODAY?

VERY SERIOUS NOT A PROBLEM AT ALL
 SOMEWHAT SERIOUS NO OPINION ON THE ISSUE
 NOT SERIOUS AT ALL

77. DO YOU BELIEVE THAT A TEENAGER WHO DOESN'T REPORT ONGOING OR CONTINUING SEXUAL ABUSE TO THE AUTHORITIES HAS ONLY HIMSELF OR HERSELF TO BLAME? YES NO

sure?

78. WHAT ARE YOUR FEELINGS OR OPINIONS ABOUT AWARDING MONEY DAMAGES FOR MENTAL ANGUISH AND EMOTIONAL DISTRESS IN A CASE WHERE CHILDREN HAVE ALLEGEDLY BEEN SEXUALLY ABUSED? _____

*eventually
same*

79. DO YOU BELIEVE THAT A CHILD UNDER 12 WHO DOESN'T REPORT TO THE LEGAL AUTHORITIES OR A RESPONSIBLE ADULT THAT HE HAS BEEN A VICTIM OF SEXUAL ABUSE HAS ONLY HIMSELF TO BLAME IF THE SEXUAL ABUSE CONTINUES? YES NO

*what
sum?*

IF YES, PLEASE EXPLAIN: _____

80. DO YOU BELIEVE THAT A CHILD BETWEEN 13 AND 17 WHO DOESN'T REPORT TO THE LEGAL AUTHORITIES OR A RESPONSIBLE ADULT THAT HE HAS BEEN A VICTIM OF SEXUAL ABUSE HAS ONLY HIMSELF TO BLAME IF THE SEXUAL ABUSE CONTINUES? YES NO

IF YES, PLEASE EXPLAIN: _____

81. DO YOU BELIEVE THAT A CHILD ABUSED SEXUALLY, WHILE A MINOR, COULD CONTINUE TO BE ABUSED BY THE SAME PERPETRATOR EVEN AFTER THE MINOR TURNS 18? YES NO

*what
sum?*

IF NO, PLEASE EXPLAIN: _____

82. HAVE YOU OR ANYONE CLOSE TO YOU EVER BEEN PHYSICALLY ABUSED OR ASSAULTED AS A MINOR? YES NO

sexually?

IF YES, PLEASE EXPLAIN: _____

*too
broad*

83.

DO YOU HAVE A GENERALIZED VIEW THAT PARENTS HAVE MOST OF THE RESPONSIBILITY WHEN SOMETHING BAD HAPPENS TO THEIR CHILDREN? YES NO

IF YES, PLEASE EXPLAIN: _____

84.

WOULD YOU BE INCLINED TO BELIEVE THE TESTIMONY OF A PRIEST, OR OTHER RELIGIOUS FIGURES MORE THAN THE TESTIMONY OF OTHER PEOPLE?

YES NO

IF YES, PLEASE EXPLAIN: _____

85.

WHAT IS YOUR OPINION ABOUT THE LIKELIHOOD THAT VICTIMS OF CHILDHOOD SEXUAL ABUSE WILL EXPERIENCE PERMANENT CONSEQUENCES IN THEIR LATER LIFE?

86.

HAVE YOU OR ANYONE CLOSE TO YOU EVER BEEN ACCUSED OF PHYSICAL ABUSE?

YES, SELF YES, SOMEONE CLOSE NO

IF YES, PLEASE EXPLAIN: _____

87.

HAVE YOU OR ANYONE CLOSE TO YOU EVER BEEN ACCUSED OF CHILDHOOD SEXUAL ABUSE?

YES, SELF YES, SOMEONE CLOSE NO

IF YES, PLEASE EXPLAIN: _____

88.

HAVE YOU OR ANYONE CLOSE TO YOU EVER BEEN ACCUSED OF UNWANTED SEXUAL ADVANCES?

YES, SELF YES, SOMEONE CLOSE NO

IF YES, PLEASE EXPLAIN: _____

89.

HOW DO YOU GENERALLY FEEL ABOUT MONEY DAMAGE AWARDS IN CIVIL CASES? _____

90.

ARE YOU COMFORTABLE (OR DO YOU HAVE ANY RESERVATIONS ABOUT) AWARDING MONEY DAMAGES FOR PEOPLE WHO HAVE SUFFERED EMOTIONAL DISTRESS AND MENTAL DAMAGES? _____

12/2/00

*own definitions
sum*

mutations

abuse

mutations

mutations

*sexual
of a woman*

*W. K. ...
General of ...*

91. HAVE YOU EVER UNDERGONE PSYCHIATRIC OR PSYCHOLOGICAL TREATMENT?

YES NO

IF YES, DID YOU EXPECT THE TREATMENT TO BE HELPFUL WHEN YOU BEGAN IT?

YES NO

IF YES, DID IT TURN OUT TO BE HELPFUL OR NOT?

YES NO DON'T KNOW

HAS ANYONE YOU KNOW WELL EVER UNDERGONE PSYCHIATRIC OR PSYCHOLOGICAL TREATMENT?

YES NO

IF YES, DID THEY EXPECT THE TREATMENT TO BE HELPFUL WHEN THEY BEGAN IT?

YES NO DON'T KNOW

IF YES, DID IT TURN OUT TO BE HELPFUL OR NOT?

YES NO DON'T KNOW

93. TO WHAT EXTENT DO YOU TRUST THE JUDGMENT OF MENTAL HEALTH PROFESSIONALS IN DIAGNOSING PEOPLE'S PROBLEMS?

QUITE A BIT SOMEWHAT NOT TOO MUCH

PLEASE EXPLAIN WHY YOU FEEL THE WAY YOU DO: _____

94. PLACE A CHECK MARK ON THE APPROPRIATE LINE(S) IF YOU OR ANYONE CLOSE TO YOU HAS EVER BEEN EMPLOYED IN ANY CAPACITY BY ANY OF THE FOLLOWING TYPES OF BUSINESSES:

YOURSELF

OTHER PERSON

ANY COURT IN THE STATE OF CALIFORNIA

ATTORNEY, LAW FIRM, OR LAW OFFICES

reputation

CLAIMS ADJUSTMENT, EVALUATION, REVIEW, SETTLEMENT OR INVESTIGATION

ACCIDENT INVESTIGATION OR LAW ENFORCEMENT

DISABILITY, HEALTH, LIFE, CASUALTY, OR ACCIDENTAL INJURY BENEFITS OR PROGRAMS

ECONOMICS, ACTUARIAL, OR INVESTMENTS

HEALTH CARE DOCTOR, NURSING, HOSPITAL, DENTAL, PHYSICAL THERAPY, PHARMACY, OR ANY RELATED FIELD

95. IF YOU CHECKED ANY LINE IN THE PREVIOUS QUESTION, PLEASE STATE THE RELATIONSHIP OF THAT PERSON TO YOU, THE TYPE AND DETAILS OF THAT EMPLOYMENT, AND THE YEARS OF THAT EMPLOYMENT: _____

96. DO YOU HAVE ANY PHYSICAL OR MEDICAL PROBLEMS WHICH WOULD MAKE JURY DUTY DIFFICULT FOR YOU? YES NO

IF YES, PLEASE DESCRIBE: _____

97.

IF YOU HAVE ANY ETHICAL, RELIGIOUS, POLITICAL, OR OTHER BELIEFS THAT MAY PREVENT YOU FROM SERVING AS A JUROR, EXPLAIN: _____
