



Clerk of the Circuit Court, Brevard County, Florida

Administration, P.O. Box 999, Titusville, Florida 32781-0999

Telephone: (321) 637-5413 · www.brevardclerk.us

Scott Ellis, Clerk

REQUEST FOR COVID-19 RELATED EXCUSAL FROM JURY SERVICE

Florida Supreme Court Administrative Order 20-23, 5th Amendment, provides for excusal of potential jurors from jury service for the below COVID-19 related reasons. If any of the following reasons apply to you and you would like for your service to be excused, please complete the below form and return this form to the Clerk. The form must be signed and returned to us by mail, fax, or email at least **five** days prior to your service date.

1. I do not meet the court's Phase 2 screening requirements for courthouse entry as established in the circuit's operational plan.
2. I am an individual at a higher risk for severe illness due to COVID-19 infection as identified by the Centers for Disease Control and Prevention. The illnesses identified by the Centers for Disease Control and Prevention include:
 - a. chronic kidney disease;
 - b. COPD (chronic obstructive pulmonary disease) including emphysema and chronic bronchitis;
 - c. immunocompromised state from solid organ transplant; blood or bone marrow transplant; HIV with a low CD4 cell count or not on HIV treatment; prolonged use of corticosteroids or use of other immune weakening medicines;
 - d. hemoglobin disorders such as sickle cell disease and thalassemia;
 - e. serious heart conditions and other cardiovascular and cerebrovascular disease such as; heart failure; coronary artery disease; congenital heart disease; cardiomyopathies; pulmonary hypertension;
 - f. Obesity, defined as a body mass index (BMI) of 30 or above;
 - g. type 2 diabetes mellitus;
 - h. currently have cancer;
 - i. have had stem cell treatment for cancer in the past;
 - j. genetic immune deficiencies including common variable immune deficiency, selective IgA deficiency, severe combined immunodeficiency, chronic granulomatous disease, and complement deficiencies;
 - k. taking oral or intravenous corticosteroids or other medicines called immunosuppressants that lower the body's ability to fight some infections, for example, mycophenolate, sirolimus cyclosporine, tacrolimus, etanercept, rituximab;
 - l. rheumatoid arthritis, lupus, and inflammatory bowel disease.
3. I must care for a child or relative whose regular care provider is closed or unavailable for reasons related to COVID-19.
4. I am receiving leave pursuant to the Families First Coronavirus Response Act.

I am an individual that qualifies for an excusal for one of the aforementioned reasons and I request an excusal from jury service.

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true.

Signature

Date

Print

Please return this form to:

Brevard County Clerk of Court
P.O. Box 219
Titusville, FL 32781

Fax: 321-637-5482

Email: Jury.Assistant@brevardclerk.us