

Trial Roster-Defense
Colorado High School Mock Trial Program



Trial Roster forms are to be duplicated and completed by each team prior to each round and presented to the presiding judge, scoring panelists and opposing counsel before the round begins (5 duplicates per trial). Your team must be identified only by team code.

Team Code: _____

Round (circle one) 1 2 3 4 Championship Round

**NAME of STUDENT
ATTORNEYS**

TASKS (please circle one)

1.) _____
(Student's Name)

Opening / Direct / Cross / Closing

2.) _____
(Student's Name)

Opening / Direct / Cross / Closing

3.) _____
(Student's Name)

Opening / Direct / Cross / Closing

**NAME of STUDENT
WITNESSES
(Number in order of appearance)**

GENDER of WITNESS

ROLE to be PORTRAYED

4.) _____

M F

5.) _____

M F

6.) _____

M F

7.) _____

Timekeeper (may not communicate with team)

Team Member (s) Not Participating in this Round:

8.) _____

11.) _____

9.) _____

12.) _____

10.) _____

13.) _____