

# 2027 TRIAL SQUAD ROSTER FORM

## *Mississippi High School Mock Trial Competition*

This sheet needs to be copied and exchanged by opposing teams immediately before the beginning of each round at each level (Regional and Statewide) of the Mock Trial Competition. Each attorney will perform one direct examination and one cross examination. Please identify the attorneys handling Opening and Closing Statements and identify which witness each attorney will examine (see Rule 10). **Four copies will be needed for each round** (see Rule 33), one for opposing team and three for the judges. You should complete two versions of this form; one for when your team is competing as the prosecution/plaintiff and one for when your team is competing as the defense.

*Do not place team or attorney/teacher coach identifying information on the forms used in competition rounds. Please print or type.*

**TEAM CODE:** \_\_\_\_\_ (you will receive this code at registration)

In this round, team members listed on this roster represent the: Select One

ATTORNEYS Name of Student Attorney	Tasks Performed	Witness to be Examined
1. _____	<b>Opening</b>	Direct: _____ Cross: _____
2. _____		Direct: _____ Cross: _____
3. _____	<b>Closing</b>	Direct: _____ Cross: _____
		Direct: _____ Cross: _____

*Witnesses may be called in any order. (See Rule 10)*

PROSECUTION Name of Student Witness	Preferred Pronouns (select one)	Witness Role to be Portrayed
1. _____	M/F	
2. _____	M/F	
3. _____	M/F	

DEFENSE Name of Student Witness	Preferred Pronouns (select one)	Witness Role to be Portrayed
1. _____	M/F	
2. _____	M/F	
3. _____	M/F	

**Name of Team Timekeeper for this Round:** \_\_\_\_\_