

Campus Police Department NOTIFICATION OF INTENT TO CARRY CONCEALED FIREARM ON WALTERS STATE PROPERTY

Registrant Name: (Last)	_(First)	(M/I)	
Institution Department:			
Employee Banner I. D. Number:			
Employee Status: Full Time (37.5 hrs. per week)	Regular Part Time	Faculty Staff	
Cell Phone Number:	_ Office Telephone Numbe	er:	,
Personal e-mail address:			
Work e-mail address:			,
Campus Location(s) where concealed weapon will be	carried (check all that app	oly):	
Claiborne Greeneville Morristown	Sevierville		
Carry Permit Number:	Expiration Date:	State:	
By signing below, I certify all of the following to law e	nforcement:		
 law. I am not enrolled as a student at any I will notify the Walters State Campus Poli handgun carry permit status. I acknowled institution property. I am making a personal choice to carry a hard course and scope of my institution employ by my carrying of a handgun. I will comply with Tennessee law and instit complying with Tennessee Board of Reger summarized in the, Summary of Rights and I agree that my failure to comply with Tencharges and institution discipline against respectively. 	ce Department of any charge that changes in my startandgun on institution proyment. I acknowledge that tution policies when carrynts Policy 7:01:00:00. Specific Responsibilities, of which nessee law or Tennessee	nges in my employment, stud tus may affect my right to cal perty. I am not carrying the it I may be personally liable for ing a handgun, including, wit ecifically, I will comply with the I I have received a copy. Board of Regents policies ma	dent status, or rry a handgun on handgun in the or injuries caused hout limitation, he responsibilities
Registrant Signature		Da	ate
Witnessing Officer:			
I, the witnessing law enforcement officer have provided the copy of TBR policy 7:01:00:00 , verified the registrant's cu or her signature.			
Officer's Signature			 Date

REV: 4-2021

SUMMARY OF CAMPUS CONCEALED CARRY RIGHTS AND RESPONSIBILITIES

Effective July 1, 2016, Tennessee Code Annotated 39-17-1309 has been amended to allow full-time employees of public institutions of higher education to carry <u>concealed</u> handguns if they have a valid Tennessee handgun permit; are not enrolled as a student; and have provided written notification to the proper law enforcement agency.

However, the right to carry a **concealed** handgun is subject to the following conditions:

- 1. Employees shall not carry a handgun openly or in any other manner in which the handgun is visible to ordinary observation by a reasonable person.
- 2. Employees shall have their handgun carry permit and campus registration card in their immediate possession at all times when carrying a handgun and display the permit and registration card at the request of a law enforcement officer.
- 3. Employees shall not carry a weapon other than a handgun.
- 4. Employees shall not carry a handgun at the following times or at the following locations:
 - Stadiums, gymnasiums, or auditoriums where institution sponsored events are in progress;
 - In meetings regarding student or employee disciplinary matters;
 - In meetings regarding tenure issues;
 - A hospital, a student health or <u>counseling center</u>, or an office where medical or mental health services are the primary services provided;
 - In any motor vehicle that is owned, operated, or controlled by a TBR institution and that is
 provided to an employee for use during the course of employment (state and motor pool vehicles);
 or
 - Any location where a provision of state or federal law, except the posting provisions of Tennessee Code Annotated 39-17-1359, prohibits the carrying of a handgun on that property, such as on the premises of a child care agency.

The Walters State Campus Police Department may provide scheduled education for full-time employees relating to handgun safety. Such education is voluntary.

FOR UNIVERSITY/INSTITUTION AND LOCAL LAW ENFORCEMENT:

THIS DOCUMENT <u>SUMMARIZES</u> RIGHTS AND RESPONSIBILITIES ASSOCIATED WITH EMPLOYEES CARRYING A CONCEALED HANDGUN ON INSTITUTION PROPERTY. THE EMPLOYING INSTITUTION HAS ADDITIONAL RULES AND GUIDELINES FOR EMPLOYEES TO CARRY ON CAMPUS/INSTITUTION PROPERTY. EMPLOYEES SHOULD REVIEW TBR POLICY **7:01:00:00** FOR A MORE COMPLETE DESCRIPTION OF THEIR RIGHTS AND RESPONSIBILITIES, AS WELL AS TCA: 39-17-1309, TCA 39-17-1351 and TCA 39-17-1359. IT IS THE RESPONSIBILITY OF THE EMPLOYEE TO BE AWARE OF ANY ADDITIONAL POLICIES FOR CARRYING ON THE INSITUTION'S PROPERTY.

I verify that I have printed and/or received a copy of TBR policy **7:01:00:00** and a copy of TCA-39-17-1309, 39-17-1351 and TCA 39-17-1359 so that I may review and be knowledgeable in the scope of my full rights and responsibilities.

Registrant Name (please print)	Signature	Date

CONFIDENTIAL

REV: 4-2021

PLEASE FORWARD COMPLETED FORM AND COPIES OF CARRY PERMIT AND DRIVER'S LICENSE TO THE DIRECTOR OF CAMPUS POLICE, MORRISTOWN CAMPUS