Sewanee Police Department

Weapon Safekeeping Form

Semester: __________

Tennessee Law (TCA 39-17-1309) and The University of the South policy prohibit weapons on campus. Sewanee Police Department provides students a lawful means of storage on campus for weapons they plan to use for legal recreational activities. Weapons may be stored by Sewanee Police Department for the duration of a semester in which a student is enrolled. Students enrolled in the next consecutive semester may renew the safekeeping agreement; otherwise, the weapon must be checked out by the end of the same semester it was checked in. Weapons will only be released after ownership is verified and required background checks have been made.

Please read the information below and initial by each line indicating you understand. Federal laws prohibit certain persons from receiving or possessing firearms and/or ammunition. Sewanee police Department will be unable to release/return any firearm to persons who meet any of the following criteria:

___ Is under 18 years of age;
___ Has been convicted in any court of a crime punishable by imprisonment for a term exceeding 1 year;
___ Is a fugitive from justice;
___ Is an unlawful user of or addicted to any controlled substance;
___ Has been adjudicated as a mental defective or has been committed to a mental institution;
___ Is an alien illegally or unlawfully in the United States or an alien admitted to the United States under a nonimmigrant visa;
___ Has been discharged from the Armed Forces under dishonorable conditions;
___ Has been a citizen of the United States, has renounced his or her citizenship;
___ Is subject to a court order that restrains the person from harassing, stalking, or threatening an intimate partner or child of such intimate partner; or
___ Has been convicted of a misdemeanor crime of domestic violence
___ Cannot lawfully receive, possess, ship, or transport a firearm.
___ A person who is under indictment or information for a crime punishable by imprisonment for a term exceeding 1 year cannot lawfully receive a firearm. Such person may continue to lawfully possess firearms obtained prior to the indictment or information.

References: 18 U.S.C. 922(g) and (n); 27 CFR 478.32; TCA 39-17-13

Sewanee Police Department assumes no responsibility for any firearm or other sporting equipment, other than providing a secure place of storage and reasonable means of protection. By allowing Sewanee Police Department to store my weapon, I consent to criminal background screenings which could prevent my firearm from being returned to me if it is discovered I meet any of the criteria described above. By signing below, I acknowledge I have read and understand and agree to these terms.

Owner Signature ___________________ Date ___________________

Owner Printed Name
Sewanee Police Department

Weapon Safekeeping Form

Semester: ____________________________

Owner Information

Name_____________________________________ DOB_____________ DL#______________________________

Address_____________________________________ Email__________________________

City/State/Zip__________________________________________________________________________

Home Phone______________________________ Cell Phone#____________________________

Firearm/Sporting Equipment Information

Make____________________ Mode I _________________ Caliber _______________ Serial #________________

Damage/Marks/Additional Description________________________________________________________________________

Weapons may be checked in and out as needed. Please use the same form to return the weapon to storage when it will only be checked out for a short period of time. Additional pages can be attached if needed. List only one weapon per form, even if the owner is storing multiple weapons.

FOR SPD USE ONLY (CHECK IN)

Firearm/Sporting Equipment checked in by __________________________________________________

Badge # _____________________ Date ____________________________

NCIC Check completed by ________________________________ Badge#______ Results_____________

Storage Location________________________________________ SPD Property #_____________

Comments__________________________________________________________________________

FOR SPD USE ONLY (CHECK OUT)

Firearm/Sporting Equipment checked in by __________________________________________________

Badge # _____________________ Date ____________________________

NCIC WEAPONS Check completed by _________________________ Badge#______ Results_____________

NCIC / Local criminal record check completed by: ______________ SPD Property #________________

Comments__________________________________________________________________________