

**NOTIFICATION OF EMPLOYEE'S INTENT TO
CARRY A CONCEALED HANDGUN**



Registrant Name: _____
(Last) (First) (M/I)

DOB: _____ University Department: _____

Registrant office address (building, room, and box number):

Other campus locations(s) or office(s) at which you teach or work:

Employee M#: _____ Driver's license #: _____

Office phone: _____ Cell phone: _____

Email: _____

Carry permit #: _____ Issuing state: _____ Expiration date: _____

By signing below, I certify all of the following to law enforcement:

- I am a full-time employee of Middle Tennessee State University ("MTSU") who is eligible to carry a handgun under Tennessee law. I am not enrolled as a student at any MTSU campus.
- I will notify the MTSU Police Department of any changes in my employment, student status, or handgun carry permit status. I acknowledge that changes in my status may affect my right to carry a handgun on University property.
- I am making a personal choice to carry a handgun on University property. I am not carrying the handgun in the course and scope of my University employment. I acknowledge that I may be personally liable for injuries caused by my use of a handgun.
- I will comply with Tennessee law and University policies when carrying a handgun, including, without limitation, complying with MTSU Policy 705, [Weapons on Campus](#). Specifically, I will comply with the responsibilities summarized in "[Summary of Campus Concealed Carry Rights and Responsibilities](#)", of which I have received a copy.
- I agree that my failure to comply with Tennessee law or University policies may result in personal liability, criminal charges, and University discipline against me up to and including termination of employment.

Registrant signature Date

Witnessing officer:

I, the Witnessing Law Enforcement Officer, have provided the Registrant with a copy of [Summary of Campus Concealed Carry Rights and Responsibilities](#), verified the Registrant's current eligibility to carry a handgun on MTSU property, and witnessed their signature.

Witnessing Police Officer Date

(Forward to Records Section)