



# Suffolk University Police & Security Department

8 Ashburton Place  
Boston, MA 02108

617-573-8333 (ph)  
617-742-7854 (fax)

www.suffolk.edu

## SUFFOLK UNIVERSITY – SELF-DEFENSE SPRAY REGISTRATION

Name: \_\_\_\_\_ SUID Number: \_\_\_\_\_

Home Address: \_\_\_\_\_ Residence Hall: \_\_\_\_\_

\_\_\_\_\_ Res. Hall Room Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ FID Card Expiration Date: \_\_\_\_\_

FID Card Number\*: \_\_\_\_\_

**I hereby request authorization to carry a self-defense spray (also known as mace, oleo capsicum spray or pepper spray) in the above listed residence hall on Suffolk University property. I understand that by registering to carry self-defense spray I am authorized to possess only one (1) canister of self-defense spray in my residence hall. I understand that the self-defense spray must be kept in a secure location when not in my possession. I understand that I will be subject to discipline under applicable Suffolk University policies in the event that I am found to be in violation of the Suffolk University Weapons policy or found to have maliciously or negligently discharged a self-defense spray canister. I certify that I have read and understand the Suffolk University Weapons policy.**

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

Instructions: Complete all fields and submit in person to the Suffolk University Police & Security Department (SUPD) in the Sawyer Building, 8 Ashburton Place, Boston, MA. SUPD will accept registrations Monday through Friday from 8:00 a.m. to 4:00 p.m. Applicants must present a valid Suffolk University identification.

*\*Any applicant under the age of eighteen (18) must possess a valid Firearms Identification (FID) Card and must submit a photo copy of FID card with this application.*