LOS ANGELES UNIFIED SCHOOL DISTRICT

LOS ANGELES SCHOOL POLICE DEPARTMENT



Office of the Chief 125 North Beaudry Avenue, Los Angeles, California 90012 Telephone: (213) 202-4508 - Fax: (213) 202-8676



RE: INFORMATION REGARDING PARENT/GUARDIAN LEGAL DUTIES CONCERNING SAFE GUN STORAGE

Dear Parent/Guardian:

Very truly yours,

Providing our students and staff with a safe educational environment remains one of our top priorities. We are all aware of incidents of gun violence in our surrounding communities, and across the nation. In California each year, an average of 27 children under the age of 18 have died by suicide with a gun that belonged to someone at home. In the majority of these gun-related incidents, the minor gained access to a lawfully purchased gun from their residence or the residence of a relative. Los Angeles Unified takes steps to ensure that campuses are safe from the threat of gun violence. Any student found in possession of a firearm on campus is subject to immediate arrest, suspension and expulsion proceedings. To further our efforts to protect students against firearms, and as a courtesy to our families, we would like to bring to your attention the legal obligations to protect minors from negligent gun storage. Please see two of the gun storage laws summarized below:

Safe Storage of Handguns, Los Angeles Municipal Code section 55.21

This City of Los Angeles statute makes it a crime to have a handgun within a residence unless the handgun is stored in a locked container or disabled with a trigger lock approved by the California Department of Justice.

Criminal Storage of a Firearm, California Penal Code section 25100(A)

This State statute makes it a crime to store a loaded firearm on any premises under your control, knowing or reasonably should have known, a child is likely to gain access to the firearm, and the child gains access causing death or great bodily injury.

Feel free to retrieve the full text of the above laws for further details.

Les Softman
Leslie Ramirez
Interim Chief of Police
CUT HERE AND RETURN TO YOUR SCHOOL PRINCIPAL
SAFE GUN STORAGE - ACKNOWLEDGEMENT FORM
Please sign below acknowledging receipt of this information.
Student Name (Please Print):
Parent/Guardian Name (Please Print):
Parent/Guardian Signature: Date: