**FORM A**

**REFERENCES**

Please list a minimum of three references of agencies (governments, charter schools or ISDs) that have used your services. We would prefer some of the references to be new customers in the last year, and Texas agencies are preferred:

1.

*COMPANY NAME OR CONTACT PERSON*

STREET ADDRESS CITY STATE ZIP

CONTACT PERSON TELEPHONE NUMBER

PRODUCTS/SERVICES USED

DESCRIBE AND DOCUMENT YOUR INVOLVEMENT WITH OTHER COMMUNITIES IN SIMILAR TYPE OF WORK

2.

*COMPANY NAME OR CONTACT PERSON*

STREET ADDRESS CITY STATE ZIP

CONTACT PERSON TELEPHONE NUMBER

PRODUCTS/SERVICES USED

DESCRIBE AND DOCUMENT YOUR INVOLVEMENT WITH OTHER COMMUNITIES IN SIMILAR TYPE OF WORK

### 3.

*COMPANY NAME OR CONTACT PERSON*

STREET ADDRESS CITY STATE ZIP

CONTACT PERSON TELEPHONE NUMBER

PRODUCTS/SERVICES USED

DESCRIBE AND DOCUMENT YOUR INVOLVEMENT WITH OTHER COMMUNITIES IN SIMILAR TYPE OF WORK

 **FORM B**

## BID/RFP RESPONSE SIGNATURE FORM

The undersigned, in submitting this Bid/RFP and endorsement of same, represents that he/she is authorized to obligate his/her Firm, that he/she is an equal opportunity employer and will not discriminate with regard to race, color, religion, sex, sexual or gender orientation, national origin, age or disability unrelated to job performance of this Bid/RFP; that he/she will abide by all the policies and procedures of 4mativ & The Schools; and that he/she has read this entire Bid/RFP package, and is aware of the covenants contained herein and will abide by and adhere to the expressed requirements in ***ALL*** sections of this Bid/RFP.

## Failure to manually sign this Bid/RFP Response Form will be the reason for the bid/RFP to be rejected.

### SUBMITTED BY:

Firm:

(LEGAL Firm Name)

### By:

**(Original Signature)**

Name:

(Typed or Printed Name)

Title:

(Type or Printed Title) (Date)

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #:

Fax #:

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Taxpayer Identification #: \_

***NOTE: Submit copy of Bidder’s/ Proposer’s current W-9 Form***

Prompt Payment Discount: % Days

I hereby acknowledge receipt of the following addenda which have been issued and incorporated into the Bid/RFP Document. (*Please initial in ink beside each addenda received. If none received, leave blank*)

### Addendum No. 1 Addendum No. 2 \_ Addendum No. 3 Addendum No. 4 \_

**DEVIATION/COMPLIANCE**

 **FORM C**

**SIGNATURE FORM**

If the undersigned Firm intends to deviate from the Specifications listed in this bid/RFP document, all such deviations must be listed on this page, with complete and detailed conditions and information included or attached. 4mativ will consider any deviations in its bid/RFP award decisions, and reserves the right to accept or reject any bid/RFP based upon any deviations indicated below or in any attachments or inclusions.

In the absence of any deviation entry on this form, the Firm assures 4mativ of his/her full compliance with the Terms and Conditions, Specifications, and all other information contained in this bid/RFP document.

 No Deviation  Yes Deviations

Firm’s Name: \_

Name of Authorized Company Official: \_

***(Typed or printed)***

Title of Authorized Company Official: \_

***(Typed or printed)***

Signature of Authorized Company Official:

Date Signed:

If yes is checked, please list below. Attach additional sheet(s) if needed.

## NON-COLLUSION STATEMENT

 **FORM D**

### “The undersigned affirms that he/she is duly authorized to execute this bid/RFP, that this company, corporation, firm, partnership or individual has not prepared this bid/RFP in collusion with any other bidder/proposer, and that the contents of this bid/RFP as to prices, terms or conditions of said bid/RFP have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this bid/RFP.”

Firm’s Name: \_

Name of Authorized Company Official: \_

***(Typed or printed)***

Title of Authorized Company Official: \_

***(Typed or printed)***

Signature of Authorized Company Official:

Date Signed:

Firm hereby assigns to purchaser any and all claims for overcharges associated with this bid/RFP which arise under the antitrust laws of the United States, 15 USCA Section 1 and which arise under the antitrust laws of the State of Texas, Business and Commerce Code, Section 15.01.

**FORM E**

**CRIMINAL BACKGROUND CHECK AND FELONY CONVICTION NOTIFICATION**

1. **CRIMINAL BACKGROUND CHECK**

Firm will obtain history record information that relates to an employee, applicant for employment, or agent of the Firm if the employee, applicant, or agent has or will have continuing duties related to the contracted services; and the duties are or will be performed on school property or at another location where students are regularly present. The Firm certifies to 4mativ before beginning work, and at no less than an annual basis thereafter, that criminal history record information has been obtained. Firm shall assume all expenses associated with the background checks, and shall immediately remove any employee or agent who was convicted of a felony, or misdemeanor involving moral turpitude, as defined by Texas law, from The Schools’ property or other location where students are regularly present. 4mativ shall be the final decider of what constitutes a “location where students are regularly present.” Firm’s violation of this section shall constitute a material breach and default.

1. **FELONY CONVICTION NOTIFICATION**

Texas Education Code, Section 44.034, Notification of Criminal History, Subsection (a), states, “a person or business entity that enters into a contract with a school district must give advance notice to the district if the person or owner or operator of the business entity has been convicted of a felony.” The notice must include a general description of the conduct resulting in the conviction of a felony.

Subsection (b) states, “a school district may terminate a contract with a person or business entity if the district determines that the person or business entity failed to give notice as required by Subsection (a) or misrepresented the conduct resulting in the conviction. The district must compensate the person or business entity for services performed before the termination of the contract.”

**THE FELONY CONVICTION NOTICE IS NOT REQUIRED OF A PUBLICLY-HELD CORPORATION.**

I, the undersigned agent for the firm named below, certify that the information concerning criminal background check and notification of felony convictions has been reviewed by me, the following information furnished is true to the best of my knowledge, and I acknowledge compliance with this section.

Firm’s Name: \_

Name of Authorized Company Official: \_

1. My firm is a publicly-held corporation; therefore, this reporting requirement is not applicable: Signature of Company Official: Date: \_
2. My firm is not owned nor operated by anyone who has been convicted of a felony.

Signature of Company Official: Date: \_

1. My firm is owned or operated by the following individual(s) who has/have been convicted of a felony: Name of Felon(s): \_

Details of Conviction(s):

Signature of Company Official: Date:

 **FORM F**

## RESIDENT/NONRESIDENT BIDDER’S CERTIFICATION

Texas Government Code Chapter 2252 relates to bids by nonresident contractors. The pertinent portions of the Act are as follows:

Section 2252.001(3)

“Nonresident bidder” means a bidder who is not a resident.

Section 2252.001(4)

“Resident bidder” means a bidder whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

Section 2252.002

A governmental entity may not award a governmental contract to a nonresident bidder unless the nonresident underbids the lowest bid submitted by a responsible resident bidder by an amount that is not less than the amount by which a resident bidder would be required to underbid the nonresident bidder to obtain a comparable contract in the state in which the non resident's principal place of business is located.

I certify that is a Resident Bidder of Texas

as defined in Texas Government Code Section 2252.001(4)

Signature of Authorized Company Official: \_

Name of Authorized Company Official: \_



I certify that is a Nonresident Bidder of Texas as defined in Texas Government Code Section 2252.001(3) and our principal place of business is:

City and State:

Signature of Authorized Company Official:

Name of Authorized Company Official:

If the Bidder is a Nonresident Bidder of Texas, please answer the following:

Does the vendor or the vendor’s ultimate parent company or majority owner employ at least 500 persons in Texas?

Yes: No:

 **FORM G**

## DEBARMENT OR SUSPENSION CERTIFICATION FORM

Non-Federal entities are prohibited from contracting with or making sub-awards under covered transaction to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement of goods or services equal to or in excess of $100,000. Contractors receiving individual awards of $100,000 or more and all sub-recipients must certify that the Firm and its principals are not suspended or debarred.

By submitting this offer and signing this certificate, this Firm:

1. Certifies that no suspension or debarment is in place, which would preclude receiving a federally funded contract under the Federal OMB, A-102, common rule.

Firm’s Name:

Name of Authorized Company Official:

##### (Typed or printed)

Title of Authorized Company Official:

##### (Typed or printed)

Signature of Authorized Company Official:

Date Signed:

 **FORM H**

## CONFLICT OF INTEREST QUESTIONNAIRE

Effective January 1, 2006, Chapter 176 of the Texas Local Government Code went into effect which requires that any vendor or person considering doing business with a local government entity disclose in the Questionnaire Form CIQ, the vendor or person’s affiliation or business relationship that might cause a conflict of interest with a local government entity. By law, this questionnaire must be filed with 4mativ Technologies not less than the seventh business day after the person becomes aware of facts that require the statement to be filed.

A recent amendment to this state law that went into effect on September 1, 2007 now allows for two changes to the original statute:

1. The Conflict of Interest Questionnaire only needs to be filled out and returned with your bid if you or your company are aware of a conflict, and,
2. If the amount of the conflict exceeds $2,500.

It is the responsibility of every vendor filling out and returning this bid to determine if there is a conflict meeting the parameters listed above. If so, **4mativ requires that this Questionnaire be**  **completed and turned in with your bid.** If there is no conflict, or if the amount of the conflict is less than

$2,500, then you are not required to submit the Questionnaire with your bid.

 **FORM I**

## VEHICLE OPERATOR SCREENING INFORMATION

Please list below the agency/company that performs the **criminal background checks** for your company’s vehicle operators:

Agency name: Phone #

Agency Address:

Are these background checks maintained in the employment files?

Do you understand that 4mativ desires that no driver or vehicle operator that has been convicted of a crime of moral turpitude, or any other felony, be allowed to transport students for The Schools?

Please list below the agency/company that performs **alcohol/drug screening** for your company:

Agency name: Phone #

Agency Address:

Are drug and alcohol screenings performed on every employee prior to being offered employment?

Are employees randomly tested during employment?

If yes, how frequently?

 **Vehicle Safety Inspections**

4mativ reserves the right to conduct safety inspections of vehicles prior to personnel or students being transported. 4mativ also may conduct vehicle safety inspections at the vendor’s site.

Please list location of vehicle storage/warehousing:

**By signing below, I acknowledge that all information on this form is accurate and any change to this information will be immediately disclosed to 4mativ.**

Signature of Company Official:

Title:

Date:

 **FORM J**

**CHILD SUPPORT CERTIFICATION**

*Family Code, Section 231.006, Ineligibility to Receive State Grants or Loans or Receive Payment On Publicly Funded Contracts, prohibits the payment of state funds under a grant, contract, or loan to*

* a person who is more than 30 days delinquent in paying child support, and
* a business entity in which the obligor is a sole proprietor, partner, shareholder, or owner with an ownership interest of at least 25 percent.

Section 231.006 further provides that a person or business entity that is ineligible to receive payments for the reasons stated above shall continue to be ineligible to receive payments from the state under a contract, grant, or loan until

* all arrearages have been paid;
* the person is in compliance with a written repayment agreement or court order as to any existing delinquency; or
* the court of continuing jurisdiction over the child support order has granted the obligor an exemption from Subsection (a) as part of a court-supervised effort to improve earnings and child support payments.

Section 231.006 further requires each bid, or application for a contract, grant, or loan to include

* the name and social security number of the individual or sole proprietor and each partner, shareholder, or owner with an ownership interest of at least 25 percent of the business entity submitting the bid or application, and
* the statement in Section 3 below.

Section 231.006 authorizes a public entity to terminate a contract if it determines that the statement required below is inaccurate or false. In the event the statement is determined to be false, the vendor is liable to the public entity for attorney’s fees, costs necessary to complete the contract (including the cost of advertising and awarding a second contract), and any other damages provided by law or contract.

In accordance with Section 231.006, the names and social security numbers of the individuals identified in the contract, bid or application, or each person with a minimum 25 percent ownership interest in the business entity identified therein are provided below (attach additional sheet if necessary):

Name SSN:

Name SSN:

Name SSN:

As required by Section 231.006, the undersigned certifies the following: “the vendor or applicant certifies that the individual or business entity names in this contract, bid or application is not ineligible to received the specified payment and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate.”

Contractor authorized representative Name: Title:

Contractor authorized representative signature: Date: