



Always Innovating

**South
Texas ISD**

RIO GRANDE VALLEY | GRADES 6-12

7001 E. EXPRESSWAY 83., MERCEDES, TX 78570

P: 956.565.2454

STISD.NET

Dear Bidder:

SUBJECT: RFQ 26-001 – REQUEST FOR QUALIFICATIONS FOR ARCHITECTURAL SERVICES

The South Texas Independent School District is requesting Statement of Qualifications from interested Architects. In case of mailed qualification statements or any correspondence concerning qualification statements, the district will not be held responsible for lost or late mail.

Statement of Qualifications must be submitted to the office of Marla R. Knaub, Assistant Superintendent for Finance & Operations, 7001 East Expressway 83, Mercedes, Texas, 78570, no later than **Tuesday, September 10, 2024 at 10:00 AM.** Please submit one (1) original, two (2) copies, and (1) digital copy on a USB drive of the RFQ Proposal.

If further information is needed, contact Marla R. Knaub, Assistant Superintendent for Finance & Operations, at 956-565-2454. Please mark your envelope or package as follows:

RFQ 26-001 – REQUEST FOR QUALIFICATIONS FOR ARCHITECTURAL SERVICES

Sincerely,

Marla R. Knaub
Assistant Superintendent for Finance & Operations

MARCO ANTONIO LARA, JR., ED.D.
Superintendent

MARLA R. KNAUB
Assistant Superintendent for Finance & Operations

EFRAIN GARZA
Deputy Superintendent

LISSA FRAUSTO, MBA, SPHR
Assistant Superintendent for Human Resources

**REQUEST FOR QUALIFICATIONS
FOR
ARCHITECTURAL SERVICES**

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I. PURPOSE OF REQUEST FOR QUALIFICATIONS

The Board of Directors of South Texas Independent School District is in the process of seeking Request for Qualifications, RFQ's, from Architects for Rising Scholars Academy.

Please note that the Request for Qualifications must be received on Tuesday September 10, 2024, by 10:00 A.M. at the address below. One (1) Original and two (2) copies, and (1) one digital copy on a USB Drive (clearly marked) of the proposal must be sealed and delivered to:

South Texas Independent School District Attn: Marla R. Knaub 7001 East Expressway 83 Mercedes TX 78570 RFQ 26-001 Request for Qualifications Architectural Services
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INQUIRIES: All questions prior to the closing date should be e-mailed to Marla R. Knaub, Assistant Superintendent for Finance & Operations to marla.knaub@stisd.net "cc" reynaldo.cantu@stisd.net. Inquiries should refer to specific section numbers of the RFQ.

II. BACKGROUND

The South Texas ISD will be seeking Architects for New Rising Scholars Academy Campus

- New Construction- Rising Scholars Academy- Olmito, TX
- Survey
- Project Management
- Master Planning
- On-Call Service
- Other Services requested by District.

III. SELECTION PROCESS

In procuring the services of architects, South Texas ISD will follow the process below:

1. First, the District will select the most highly qualified provider of those services on the basis of demonstrated competence and qualifications for each project or series of projects. **(See attached Exhibit A)**
2. Next, the district will negotiate with the selected provider a contract at a fair and reasonable price.
3. If a satisfactory contract cannot be negotiated with the most highly qualified provider, the district shall formally end negotiations and select the **next** most

highly qualified provider.

4. South Texas ISD will continue the above process until a contract is entered into. South Texas ISD Board of Directors reserves the following rights, but not limited to:
 - Starting date to be negotiated
 - To terminate contract by giving a 30-day written notice
 - To pay for services on a monthly basis
 - To reject any and all negotiated proposals
 - To waive any technicalities and informalities
 - To negotiate the terms of the proposal
 - Selection will be based on what is determined to be in the best interest and most advantageous to STISD.
 - Selection may be made based on past experience

IV. RESPONSE FORMAT AND CONTENTS (TABS REQUIRED)

The responses to this Request for Qualifications will consist of ten (10) specific information subject areas which must be completed and returned in the order indicated below with each section divided and number tabbed with the appropriate section title.

1. COVER LETTER

Your packet will include a cover letter at the beginning of the Request for Qualifications. The cover letter shall provide a summary of the information presented in the Request for Qualification to include names, telephone and contact numbers of person(s) authorized to provide any clarification required. This cover letter shall also include the name of the person(s) authorized to conduct final contract negotiations on behalf of the company.

2. COMPANY INFORMATION

Include in this section your company name, address, telephone number, fax number, company background, year current firm was established, name of parent company (if applicable), principal owners, Texas registration number, type of organization (individual, partnership, corporation, joint venture, etc.)

3. PROJECT REFERENCES

Include in this section a list of five (5) education-related projects that would be representative of your firm's work and services provided; to include project name, district, contact person, phone number, project description and services provided.

4. QUALIFIED SERVICE PERSONNEL

Include in this section your firm total number of employees, supervisory responsibilities and line of authority, training, certifications that may have a role in this contract.

5. INSURANCE POLICIES

Include in this section a copy of the following insurance policies: Professional Liability, General Liability, Workmen's Compensation, and Automobile Insurance Policies.

6. FORM A

Include in this section FORM A (attached). Complete all sections of this form and sign.

7. REQUIRED FORMS

Include in this section the following forms: fully completed, and signed

Vendor Certifications Form

Non-Collusion Statement & Signature Sheet

Certificate of Interested Parties- Form 1295

Bid Acceptance Form

Deviation/Compliance Form

Qualifications Specifications Requirements Form

W9 Form

Conflict of Interest Questionnaire Form

ACH Vendor Direct Deposit Form

8. NON-COLLUSION STATEMENT

Include in this section the Non-Collusion Statement and Signature Sheet (attached). Complete all sections of this form and sign.

9. QUALIFICATIONS SPECIFICATIONS REQUIREMENTS FORM

Include in this section the Proposal Conformance Statement Sheet (attached). Complete all sections of this form and sign.

10. QUALIFICATIONS STATEMENT CHECKLIST

This section is for informational purpose only and does not have to be a part of the Qualifications Statement Response.

SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT

Form A

APPLICATION FOR PROVIDERS OF PROFESSIONAL SERVICES

1. GENERAL FIRM INFORMATION

DATE	
FIRM NAME	
ADDRESS	
CITY/ST/ZIP	

CONTACT PERSON

NAME	
TITLE	
PHONE	
FAX	
EMAIL	
TEXAS REGISTRATION NUMBER	

TYPE OF ORGANIZATION

<input type="checkbox"/>	Sole Proprietorship (Individual)
<input type="checkbox"/>	Partnership
<input type="checkbox"/>	Professional Corporation
<input type="checkbox"/>	Corporation
<input type="checkbox"/>	Joint Venture
<input type="checkbox"/>	Other: (Explain)

2. FIRM BACKGROUND AND STAFF

Year present firm established:	
--------------------------------	--

Name of parent company (if applicable):	
Address:	
Year parent company established:	
Former company name(s), if any and year(s) Established:	
Name:	Year:
Name:	Year:
Name:	Year:
Number of employees in firm:	
Total employees in firm (all office locations):	

3. PROFESSIONAL SERVICE (DISCIPLINES) PROVIDED BY FIRM

Please check all service applicable:

	A.	Architectural/Planning
	A1	District Facility Master Planning
	A2	Educational Specifications
	A3	Design
	A4	Construction Administration
	A5	Other:

	B.	Engineering
	B1	Mechanical Engineering
	B2	Electrical Engineering
	B3	Structural Engineering
	B4	Acoustical Engineering
	B5	Civil Engineering
	B6	Other:

	C.	Construction Management
	C1	Construction Manager Advisor (CMA)
	C2	Construction Manager Contractor (CMC)
	C3	Design/Build A. If your company provides design/build services, please provide a statement (50 words or less) on a separate sheet of paper indicating your experience and qualifications.
	C4	Other:

4. PROFESSION LIABILITY INSURANCE

Does your firm carry professional liability insurance?

	Yes		No	Limit Amount	\$
--	-----	--	----	--------------	----

5. EXPERIENCE PROFILE

PROFILE OF FIRM'S PROJECT EXPERIENCE FOR LAST 5 YEARS

List the total number of educational related projects over the last 5 years, including renovations and additions. Please include the Project Name, Type of Project, The School District, Name of a Contact Person and the Final Construction Price.

SPECIALIZED SERVICES/SUPPLEMENTAL SERVICES

Please list some of the unique services also provided by your firm. Ex: ADA audit and review, Energy Audits, Landscaping Design, Interior Design, Building Code Reviews, Facility plans, Site Planning/site selections, etc.

6. CURENT CLIENTS AND PROJECTS

Please list three (3) of your current clients whose projects reflect the scope of your present workload.

A.	Project:	
	District:	
	Contact Person:	
	Title:	
	Phone Number:	
	Service Provided:	

B.	Project:	
	District:	
	Contact Person:	
	Title:	
	Phone Number:	
	Service Provided:	

C.	Project:	
	District:	
	Contact Person:	
	Title:	
	Phone Number:	
	Service Provided:	

APPLICATION SIGNATURE

The information provided on this application I believe to be true and representative of the firm for which it is submitted.

Signature of Firm Contact Person

Date

SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT REQUEST FOR QUALIFICATIONS EVALUATION FORM

EXHIBIT A

PROJECT NAME: _____

FIRM NAME: _____

CATEGORIES:

	<u>RATING</u>	x	<u>WEIGHT</u>	=	<u>TOTAL</u>
1. Overall Architectural Design Experience	_____	x	3	=	_____
2. Educational Design Experience with similar projects (last 5 years)	_____	x	4	=	_____
3. Firm's Ability and Capability to perform the work.	_____	x	4	=	_____
4. Accessibility of Firm to the District/Project Location	_____	x	2	=	_____
5. Firm's Unique Qualifications/Services	_____	x	3	=	_____
6. Firm's Experience with "Green" Buildings	_____	x	1	=	_____
9. Reference Checks: (To include meeting budgets & timelines, organizing project, response Time to problems, and overall satisfaction of work)	_____	x	3	=	_____
GRAND TOTAL					= _____

Rating will be from one 1 to 5, with 1 being the worst and 5 being the best.

Evaluator

Date

NON-COLLUSION STATEMENT & SIGNATURE SHEET

The undersigned affirms that he/she is duly authorized to execute this contract, that this company, corporation, firm, partnership or individual has not prepared this Qualifications Statement in collusion with any other Offeror, and that the contents of this Qualifications Statement as to fees, terms or conditions of said Qualifications Statement have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business or to any person affiliated with South Texas ISD, prior to the official opening of this Qualifications Statement.

Further, I affirm that after the opening of this Qualifications Statement Response, I (or any representative of my company) will not discuss the contents of this Qualifications Statement with any person affiliated with South Texas ISD, other than the Assistant Superintendent of Finance & Operations, prior to the awarding of a contract related to this Qualifications Statement Response. I understand that failure to observe this procedure may cause my Qualifications Statement Response to be rejected.

I, _____, have read the standard terms and conditions, and (pages 3-4),
(print/type Name of Company Officer)

I fully understand them, and will fully execute them if I am awarded a contract related to this Qualifications Statement.

I have represented the truth concerning the felony conviction notification. I have checked off one of the three statements of page 11.

I have filled out the Qualifications Statement Specifications Requirements Form as needed (page 6).

I have read the criteria that South Texas ISD will consider to award this contract (page 10).

Company:	
Address:	
City/State/Zip:	
Telephone:	
Email Address:	

Print Name:	
Title:	
Date:	
Signature:	

The signing of this page indicates understanding and acceptance of this Request for Qualifications' terms and conditions.

QUALIFICATIONS SPECIFICATIONS REQUIREMENTS

TO BE FILLED IN BY OFFEROR AND SUBMITTED WITH QUALIFICATIONS STATEMENT

Is this Qualifications Statement in conformance with the enclosed specifications?

Yes_____ No_____

If the answer is no, offeror must identify and explain each exception taken, with reference to each page and paragraph to which the exception will apply.

It should be understood that if no exception is taken the vendor shall supply all items as specified at the time of sale. Failure to indicate any difference in products offered in this Proposal may be deemed sufficient grounds for rejection of a vendor's Proposal.

Comments:

Company's Name:	
Date:	

QUALIFICATIONS STATEMENT RESPONSE CHECKLIST REMINDER

IN ORDER FOR YOUR QUALIFICATIONS STATEMENT TO BE CONSIDERED IN THE EVALUATION PROCESS, THE FOLLOWING ITEMS ARE REQUIRED TO BE INCLUDED IN THE RESPONSE PACKAGE:

- | | | |
|--|-----------|----------|
| 1. Vendor Certifications | _____ Yes | _____ No |
| 2. Non-Collusion Statement & Signature Sheet | _____ Yes | _____ No |
| 3. Certificate of Interested Parties- Form 1295 | _____ Yes | _____ No |
| 4. Bid Acceptance Form | _____ Yes | _____ No |
| 5. Deviation/Compliance Form | _____ Yes | _____ No |
| 6. Qualifications Specifications Requirements Form | _____ Yes | _____ No |
| 7. W9 Form | _____ Yes | _____ No |
| 8. Conflict of Interest Questionnaire | _____ Yes | _____ No |
| 9. ACH Vendor Direct Deposit Form | _____ Yes | _____ No |

PLEASE SUBMIT THE WHOLE PACKAGE WITH YOUR RESPONSE

****(FAILURE TO MANUALLY SIGN THE QUALIFICATIONS STATEMENT RESPONSE WILL DISQUALIFY IT.) ****

THIS SHEET DOES NOT HAVE TO BE RETURNED WITH THE QUALIFICATIONS STATEMENT RESPONSE. IT SERVES AS A CHECKLIST FOR YOU



South Texas Independent School District

Vendor Application

Contact Information:

Reynaldo Cantu
Purchasing Agent/Accountant
Phone (956)514-4228
reynaldo.cantu@stisd.net

Instructions:

1. The application form should be completed and signed by an authorized representative of the vendor.
2. The application should be submitted (as noted below) with all supporting documents in PDF format, including but not limited to:
 - a. [W-9 Form](#)
 - b. [Conflict of Interest Questionnaire](#)
 - c. Vendor Certification Forms
 - House Bill 89 Verification Form
 - Senate Bill 252 Verification Form
 - Texas Historically Underutilized Businesses (HUB)- TEC 44.031(b)(6) or Small and Minority Firms, Women's Business Enterprises and Labor Surplus Area Firm
 - Felony Conviction Form Certificate of Insurance (as appropriate for on-site professional services)
 - Ethics Form 1295
 - South Texas ISD EDGAR Certifications
 - d. South Texas ISD ACH Form
 - e. Certification of Criminal History Record Information (if working directly with students)

Notice to Prospective Vendors:

1. Vendors are not placed on the district's approved vendor list until a purchase order is approved by the purchasing department.
2. Vendors must accept purchase orders for all purchases. The district will not be responsible for payment for goods or services that are provided to South Texas ISD staff without an approved purchase order issued by the purchasing department.
3. All invoices must reflect the purchase order number and must be emailed (preferred) or postal mailed to the South Texas ISD Accounts Payable Department (mailing address, fax number and email address are noted below).
4. All payments are net 30 days after receipt of the goods and/or services.

Submit Forms:

South Texas Independent School District -

Purchasing Department

Attn: Reynaldo Cantu

7001 E. Expressway 83

Mercedes, TX 78570

reynaldo.cantu@stisd.net

South Texas Independent School District -

Account Payables (Vendors #'s-Li)

Attn: Maricruz Moreno

7001 E. Expressway 83

Mercedes, TX 78570

maricruz.moreno@stisd.net

South Texas Independent School District -

Account Payables (Vendors Lo-Z)

Attn: Yolanda Olivo

7001 E. Expressway 83

Mercedes, TX 78570

yolanda.olivo@stisd.net

South Texas Independent School District -

Account Payables (Fleet Rite, HEB, SAM'S, Child Nutrition Vendors, Utilities, Travel)

Attn: Miriam Jimenez

7001 E. Expressway 83

Mercedes, TX 78570

miriam.jimenez@stisd.net



Vendor Application

Vendor Identification:

Name of Company/Firm: _____

Vendor DBA, if appropriate: _____

Tax ID No. _____

List any Cooperative contracts such as EPCNT, TIPS, Buy Board, etc.

Goods and Services Provided:

Vendor Contact Information:

Vendor Mailing Address: _____

Vendor Remit Address: (if different from mailing address)

Vendor Phone Number: _____

Vendor Fax Number: _____

Vendor Website URL: _____

Vendor Email Address: (for distribution of Purchase Orders)

I hereby certify that the above information is true and correct. I further certify that I am an authorized representative of this vendor.

Vendor Authorized Representative (Print Name)

Title

Vendor Authorized Representative (Signature)

Date

Please note that completing and submitting this form does not mean you are approved to do business with South Texas ISD. Upon receipt and approval of these form, you will be entered into the district's vendor files.

According to Board approved District policy, only Purchasing Department personnel are authorized to make commitments to purchase for South Texas ISD. South Texas ISD, therefore, assumes no liability for payment obligations except those authorized by a properly executed purchase order issued by the Purchasing Department.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the
requester. Do not
send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number											
				-				-			
or											
Employer identification number											
					-						

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person	Date
------------------	--------------------------	------

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

2 ☐ **Check this box if you are filing an update to a previously filed questionnaire.** (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes ☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

☐ Yes ☐ No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 ☐ Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7

Signature of vendor doing business with the governmental entity

Date

Conflict of Interest Questionnaire - EXAMPLE PAGE

All individuals or companies being paid by STISD are REQUIRED to complete this form

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

Individual or company name goes here

2 ☐ Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date you became aware that the originally filed questionnaire was incomplete or inaccurate.)

If you have an outside personal relationship or business arrangement with someone who works at STISD, list their name here. If there is no pre-existing relationship, write N/A here.

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

If you have a personal relationship or business arrangement with anyone at STISD, please describe it in this section, and answer questions A and B.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes

☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

☐ Yes

☐ No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

Check if applicable

Complete this section if applicable.

6 ☒ Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7 Signature & date required from ALL VENDORS

Signature of vendor doing business with the governmental entity

Date

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

A complete copy of Chapter 176 of the Local Government Code may be found at <http://www.statutes.legis.state.tx.us/Docs/LG/htm/LG.176.htm>. For easy reference, below are some of the sections cited on this form.

Local Government Code § 176.001(1-a): "Business relationship" means a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on:

- (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity;
- (B) a transaction conducted at a price and subject to terms available to the public; or
- (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency.

Local Government Code § 176.003(a)(2)(A) and (B):

- (a) A local government officer shall file a conflicts disclosure statement with respect to a vendor if:

- (2) the vendor:

(A) has an employment or other business relationship with the local government officer or a family member of the officer that results in the officer or family member receiving taxable income, other than investment income, that exceeds \$2,500 during the 12-month period preceding the date that the officer becomes aware that

(i) a contract between the local governmental entity and vendor has been executed;
or

(ii) the local governmental entity is considering entering into a contract with the vendor;

(B) has given to the local government officer or a family member of the officer one or more gifts that have an aggregate value of more than \$100 in the 12-month period preceding the date the officer becomes aware that:

- (i) a contract between the local governmental entity and vendor has been executed; or
- (ii) the local governmental entity is considering entering into a contract with the vendor.

Local Government Code § 176.006(a) and (a-1)

- (a) A vendor shall file a completed conflict of interest questionnaire if the vendor has a business relationship with a local governmental entity and:

(1) has an employment or other business relationship with a local government officer of that local governmental entity, or a family member of the officer, described by Section 176.003(a)(2)(A);

(2) has given a local government officer of that local governmental entity, or a family member of the officer, one or more gifts with the aggregate value specified by Section 176.003(a)(2)(B), excluding any gift described by Section 176.003(a-1); or

(3) has a family relationship with a local government officer of that local governmental entity.

- (a-1) The completed conflict of interest questionnaire must be filed with the appropriate records administrator not later than the seventh business day after the later of:

- (1) the date that the vendor:

(A) begins discussions or negotiations to enter into a contract with the local governmental entity; or

(B) submits to the local governmental entity an application, response to a request for proposals or bids, correspondence, or another writing related to a potential contract with the local governmental entity; or

- (2) the date the vendor becomes aware:

(A) of an employment or other business relationship with a local government officer, or a family member of the officer, described by Subsection (a);

(B) that the vendor has given one or more gifts described by Subsection (a); or

(C) of a family relationship with a local government officer.

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

OFFICE USE ONLY

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

4 Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
		Controlling	Intermediary

5 Check only if there is NO Interested Party. ☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)

ADD ADDITIONAL PAGES AS NECESSARY

**SOUTH TEXAS INDEPENDENT SCHOOL DISTRICT
NON-COLLUSIVE BIDDING CERTIFICATE
BID ACCEPTANCE FORM**

By submission of this bid or proposal, the Bidder certifies that:

1. The undersigned affirms that they are duly authorized to execute this contract;
2. This bid or proposal has been independently arrived at without collusion with any other Bidder or with any Competitor;
3. This bid or proposal has not been knowingly disclosed and will not be knowingly disclosed, prior to the opening of bids, or proposals for this project, to any other Bidder, Competitor or potential competitor;
4. No attempt has been or will be made to induce any other person, partnership or corporation to submit or not to submit a bid or proposal;
5. The person signing this bid or proposal certifies that he has fully informed himself regarding the accuracy of the statements contained in this certification, and under the penalties being applicable to the Bidder as well as to the person signing in its behalf.

Signature below certifies accuracy of answers to all sections on this page.

FIRM NAME

DOING BUSINESS AS (dba)

ADDRESS

CITY, STATE, ZIPCODE

TELEPHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

SIGNATURE OF COMPANY OFFICIAL AUTHORIZING THIS PROPOSAL

COMPANY OFFICIAL (PRINT NAME)

OFFICIAL TITLE/POSITION



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Vendor Certifications
Agreement Funded by U.S. Federal Grant

1. Felony Conviction Notification

Texas Education Agency 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 an 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." This notice is not required of a publicly-held corporation, but the company representative must check off a selection below (A, B, or C).

Initial where applicable.

- ☐ A. My company is a publicly-held corporation; therefore, this reporting requirement is not applicable
- ☐ B. My company is not owned nor operated by anyone who has been convicted of a felony
- ☐ C. My company is owned and operated by the following individual(s) who has/have been convicted of a felony:
Name of Felon(s): _____
Details of Conviction(s): _____

2. Criminal History Record Information Review of Certain Contract Employees

By signing below, the Bidder agrees to comply with Section 22.0834. Criminal History Record Information Review of Certain Contract Employees, Texas Education Code if awarded a contract through this solicitation. The undersigned Bidder, if awarded a contract, shall obtain criminal history record information through the criminal history clearinghouse as provided by Section 411.0845, Government Code relating to an employee or applicant who has or will have continuing duties related to the contracted services; and the employee or applicant has or will have direct contact with students. The Bidder agrees to certify of the receipt of criminal history record information before or immediately after employing or securing the services of the employee or applicant that has or will have continuing duties related to the contracted services if the employee or applicant has or will have direct contact with students. The Bidder further agrees that if awarded a contract, shall assume all expenses associated with the criminal background check 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 District property or the location where students are present.

- ☐ None of my employees and any of my subcontractors has or will have continuing duties related to the contracted services; and has or will have direct contact with students. I further certify that my company has taken precautions or imposed conditions to ensure that my employees and any subcontractor will not have continuing duties related to the contracted services; and will not have direct contact with students throughout the term of the Contract.

OR

- ☐ Some or all of my employees and/or my subcontractors will have continuing duties related to the contracted services; and will have direct contact with students. I further certify that:

3. Debarment and Suspension

By signing below Contractor certifies that neither it nor its principals are currently listed on the government-wide exclusions in SAM as debarred, suspended, or otherwise excluded by agencies or declared ineligible under statutory or regulatory authority other than Executive Order 12549. Contractor further agrees to immediately notify the District if he/she is later listed on the government-wide exclusions in SAM, or is debarred, suspended, or otherwise excluded by agencies or declared ineligible under statutory or regulatory authority other than Executive Order 12549.

4. Confidential/Copyrighted Information

By signing below, the Contractor agrees, if a bid is, or parts of bid is confidential, the Contractor has specified by stamping in bold letters the term "**CONFIDENTIAL**" on all or the confidential part of the bid. The bid may be considered public information even though all or parts are marked confidential. Furthermore, Contractor agrees a copyrighted bid is unacceptable and will be disqualified as unresponsive.



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Vendor Certifications
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5. Declaration of Business Location- TEC 44.031(b)(8)

By signing below, Bidder certifies the Bidder's or the Bidder's ultimate parent company or majority owner:

☐ A. Has its principal place of business in the State of Texas; **OR**

☐ B. Employs at least 500 persons in the State of Texas; **OR**

☐ C. Principal place of business is not in the State of Texas: _____
(City, State)

6. Owner(s) Name of Business

By signing below, Bidder certifies the owner(s) name of the business submitting bid is/are: (Please print name(s) below. If not applicable, please indicate N/A)

_____	_____
_____	_____
_____	_____
_____	_____

7. Delinquent Taxpayers

In accordance with law, the District shall not enter a contract or other transaction with a person indebted to the District, nor shall the District award a contract to or enter into a transaction with an apparent low bidder or successful proposer indebted to the District.

☐ I am not a delinquent taxpayer to South Texas ISD

☐ I am a delinquent taxpayer to South Texas ISD (Your bid may be disqualified if your debt is not cleared prior to award.)

8. Texas Historically Underutilized Businesses (HUB)- TEC 44.031(b)(6) or Small and Minority Firms, Women's Business Enterprises and Labor Surplus Area Firm

Contractor certifies the Bidder's company is HUB certified with the State of Texas.

☐ I am an active certified HUB vendor. HUB expiration date: _____

☐ Small and Minority Firms, Women's Business Enterprises and Labor Surplus Area Firms

☐ I am neither.

9. Buy American Provisions

By signing below, Contractor certifies that Contractor is in compliance with all applicable provisions of the Buy America Act. Purchases made in accordance with the Buy America Act must still follow the applicable procurement rules calling for free and open competition.

10. Prohibition on Contracts with Companies Boycotting Israel- HB89

By signing below, pursuant to Texas Government Code, Chapter 2270, {Vendor} represents and warrants to the District that {Vendor} does not boycott Israel and will not boycott Israel during the term of This Agreement.

11. Non Collusion Statement

By signing below, {Proposer} certifies and represents to South Texas ISD that {Proposer} has not offered, conferred, or agreed to confer any pecuniary benefit, as defined by Section 1.07(a)(6) of the Texas Penal Code, or any other thing of value, as consideration for the receipt of information or any special treatment or advantage relating to this proposal; the {Proposer} also certifies and represents that



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Vendor Certifications

Agreement Funded by U.S. Federal Grant

Proposer} has not offered, conferred or agreed to confer any pecuniary benefit or other things of value as consideration for the recipient's decision, opinion, recommendation, vote or other exercise of discretion concerning this proposal; the {Proposer} certifies and represents that Proposer has neither coerced nor attempted to influence the exercise of discretion by any officer, trustee, agent or employee of the South Texas School District concerning this proposal on the basis of any consideration not authorized by law; the Proposer also certifies and represents that Proposer has not received any information not available to other proposers so as to give the undersigned an advantage with respect to this proposal; the {Proposer} further certifies and represents that {Proposer} has not violated any state, federal or local law, regulation or ordinance relating to bribery, improper influence, collusion or the like and that Proposer will not in the future, offer, confer, or agree to confer any pecuniary benefit or other thing of value of any officer, trustee, agent or employee of the South Texas Independent School District in return for the person having exercised the person's official discretion, power or duty with respect to this proposal; the Proposer certifies and represents that it has not now and will not in the future offer, confer, or agree to confer a pecuniary benefit or other thing of value to any office, trustee, agent or employee of the South Texas Independent School District in connection with information regarding this proposal, the submission of this proposal, the award of this proposal or the performance, delivery or sale pursuant to this proposal; the {Proposer} certifies that the Proposer has not prepared this proposal and will not prepare any future proposals arising from this Request for Proposal (RFP) in collusion with any other respondent, and that the content of any future proposals arising out of this RFP will not be communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the District's selection of a contractor for this RFP.

12. Prohibition on Contracts with Companies Engaged with Iran, Sudan or Foreign Terrorist Organization- SB252

By signing below, {Vendor} hereby certifies that it is not a company identified on the Texas Comptroller's list of companies known to have contracts with, or provide supplies or services to, the government of Iran, the government of Sudan, or a foreign organization designated as a Foreign Terrorist Organization by the U.S. Secretary of State.

13. Applicable to Grants, Subgrants, Cooperative Contracts, and Contracts Exceeding \$100,000 in Federal Funds

Submission of this certification is a prerequisite for making or entering into this transaction and is imposed by section 1352, Title 31, U.S. Code. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Any person who fails to file the required certification shall be subject to civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. The undersigned certifies, to the best of his/her knowledge and belief, that:

1. No Federal appropriated funds have been paid or will be paid or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of congress, or an employee of a member of Congress in connection with the awarding of a Federal contract, the making of a Federal grant, the making of a Federal loan, the entering into a cooperative Contract, and the extension, continuation, renewal, amendment, or modification of a Federal contract, grant, loan, or cooperative Contract.

2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of congress, or an employee of a member of Congress in connection with this Federal grant or cooperative Contract, the undersigned shall complete and submit Standard Form-LLL, "disclosure Form to Report Lobbying", in accordance with its instructions.

3. The undersigned shall require that the language of this certification be included in the award documents for all covered sub-awards exceeding \$100,000 in Federal funds at all appropriate tiers and that all sub-recipients shall certify and disclose accordingly.

14. Equal Employment Opportunity

In fulfilling its obligations under the Agreement, Proposer shall comply with E.O. 11246, "Equal Employment Opportunity," as amended by E.O. 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and as supplemented by regulations at 41 CFR part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor."

15. Rights to Inventions Made Under a Contract or Agreement



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Vendor Certifications
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To the extent that the Agreement requires the performance of experimental, developmental or research work, Proposer agrees that the District shall have rights in any resulting invention in accordance with 37 CFR part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the District from which received financial assistance to carry out the work contemplated by the Agreement.

16. Clean Air Act (42 U.S.C. § 7401 et seq.) and the Federal Water Pollution Control Act (33 U.S.C. § 1251 et seq.), as amended

In the event that the fees payable to Proposer under the Agreement exceed \$100,000, Proposer agrees to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. § 7401 et seq.) and the Federal Water Pollution Control Act as amended (33 U.S.C. § 1251 et seq.). Violations shall be reported to the Awarding Agency and the Regional Office of the Environmental Protection Agency (EPA).

17. Byrd Anti-Lobbying Amendment (31 U.S.C. § 1352)

In the event that the fees payable to Proposer under the Agreement exceed \$100,000, Proposer shall file the certification required under 31 U.S.C. § 1352. Each tier shall certify to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. § 1352. Each tier shall also disclose any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award. Such disclosures shall be forwarded from tier to tier up to the Proposer.

18. Access to Records

Proposer agrees that the Inspector General of the District or any of their duly authorized representatives shall have access to any books, documents, papers and records of the Proposer that are directly pertinent to Proposer's discharge of its obligations under the Agreement for the purpose of making audits, examinations, excerpts and transcriptions.

19. Applicability to Selected Vendors

Proposer agrees that all contracts it awards pursuant to the Agreement shall be bound by the foregoing terms and conditions.

I, the undersigned agent for the firm named below, certify that the information stated above has been reviewed by me and the information furnished is true to the best of my knowledge.

Vendor Name: _____

Address, City, State, Zip Code: _____

Phone Number: _____

Printed Name of Authorized Representative: _____

Title of Authorized Representative: _____

Email Address: _____

Signature of Authorized Representative: _____

Date: _____



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Phone: 956.565.2454

Web: www.stisd.net

7001 E. Expressway 83, Mercedes, TX 78570

ACH Vendor Direct Deposit Form

Section 1: Payee Information (all information is REQUIRED)			
Payee Name		TIN/EIN or SS#	
Payment Address	City	State	Zip Code
Accounting/ACH Contact Name			
Email Address for Remittance Advice *Required*		Phone Number	

Section 2: Financial Institution Information (all information is REQUIRED)			
Financial Institution Name			
Financial Institution Address	City	State	Zip Code
Routing Transit Number**	Customer Account Number	Type of Account	
		Checking	Savings

** Please provide the 9 digit bank routing number from a check. The routing number from a deposit slip is invalid.

Submit a copy of voided check or bank verification with this form.

Section 3: Authorization for Direct Deposit Setup (REQUIRED)
I (we) hereby authorize South Texas Independent School District, hereinafter to initiate automatic credit entries, and if necessary, to initiate automatic debit entries for adjustments for any credit entries in error to my (our) account identified below, and the financial institution named below to credit and/or debit the same to such account, for payment of goods and/or services.
This authorization is to remain in full force and effect until South Texas Independent School District has received written notification of its termination in such manner as to afford South Texas ISD and the Financial Institution a reasonable opportunity to act on it.

Authorized Signature	Printed Name	Date

****NOTE** This form will not be processed unless we receive the voided check and/or bank verification letter.**



Criminal History Record Information for Contracted Services

CONFIDENTIAL

The Texas Education Code Section 22.0834 authorizes the District to obtain criminal history information on an employee of, or applicant for employment by, a person that contracts with the District to provide services if: the employee or applicant 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 information requested below is necessary to obtain criminal history record information.

Vendor Name: _____

Campus/Department Originating Contract: _____

Last Name: _____ First Name _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Sex: () Male () Female

Ethnicity: () Black () White/Other

I hereby authorize the South Texas Independent School District to obtain from any law enforcement agency or criminal justice agency all criminal history record information that relates to me.

Note to Contractors: The information you are providing about age, sex, and ethnicity will not be used to determine eligibility for award of a contract but will be used solely for the purpose of obtaining criminal history record information.

Signature

Date