

**HOUSTON INDEPENDENT SCHOOL DISTRICT
CONTRACTOR CRIMINAL HISTORY BACKGROUND CHECK CERTIFICATION**

HISD Contract/Project # 27-09-07 **Project Title:** Dedicated Internet Access (E-Rate Eligible)

Vendor Name (Prime Contractor): _____

SECTION I: This section to be completed by all vendors to specify whether their engagement with HISD will involve direct contact with students.

☐ **NO direct contact with students** - As required by HISD and applicable law, I hereby certify that ***NO employee and/or subcontractor*** will have direct contact with any student at HISD as defined under 19 Tex. Admin. Code § 153.1101(7). Skip 'Section II' and complete 'Section III' below.

☐ **WITH direct contact with students AND continuing duties** - As required by HISD and applicable law, I hereby certify that **the list of employees and/or subcontractors below MAY/WILL** have both direct contact with students and continuing duties at HISD as defined under 19 Tex. Admin. Code § 153.1101(7) & (2). Complete 'Section II' and 'Section III' below. Only vendor(s) meeting both criteria are considered as having direct contact with students.

- 19 Texas Administrative Code 153.1101(7) **Direct contact with students**—The contact that results from activities that provide substantial opportunity for verbal or physical interaction with students that is not supervised by a certified educator or other professional district employee. Contact with students that results from services that do not provide substantial opportunity for unsupervised interaction with a student or students, such as addressing an assembly, officiating a sports contest, or judging an extracurricular event, is not, by itself, direct contact with students. However, direct contact with students does result from any activity that provides substantial opportunity for unsupervised contact with students, which might include, without limitation, the provision of coaching, tutoring, or other services to students.
- 19 Texas Administrative Code 153.1101(2) **Continuing Duties related to contracted services**—Work duties that are performed pursuant to a contract to provide services to a school entity on a regular, repeated basis rather than infrequently or one-time only.

SECTION II: This section to be completed ONLY if vendor's employees/subcontractors will have direct contact with students and continuing duties.

	Full Name of each Employee (as shown on driver's license); relationship to Prime Contractor (Employee or Subcontractor Employee); and Driver's License Number*	Date of Birth (mm/dd/yyyy)	Has Employee ever been fingerprinted by any public school district in Texas? If YES , provide the name of the school district. If NO or DON'T KNOW , employee must be fingerprinted prior to performing services at HISD.	HISD Internal Use Only
1	Select One: ☐ Employee ☐ Subcontractor Employee Full Name: _____ Driver's License: _____	____/____/____	☐ Yes – Name of Texas school district: _____ ☐ No / Don't Know	☐ Approved ☐ Denied
2	Select One: ☐ Employee ☐ Subcontractor Employee Full Name: _____ Driver's License: _____	____/____/____	☐ Yes – Name of Texas school district: _____ ☐ No / Don't Know	☐ Approved ☐ Denied
3	Select One: ☐ Employee ☐ Subcontractor Employee Full Name: _____ Driver's License: _____	____/____/____	☐ Yes – Name of Texas school district: _____ ☐ No / Don't Know	☐ Approved ☐ Denied
4	Select One: ☐ Employee ☐ Subcontractor Employee Full Name: _____ Driver's License: _____	____/____/____	☐ Yes – Name of Texas school district: _____ ☐ No / Don't Know	☐ Approved ☐ Denied
5	Select One: ☐ Employee ☐ Subcontractor Employee Full Name: _____ Driver's License: _____	____/____/____	☐ Yes – Name of Texas school district: _____ ☐ No / Don't Know	☐ Approved ☐ Denied

*Attach additional pages as necessary

SECTION III – Vendor Certification:

By signing below, Vendor acknowledges and agrees that Vendor has obtained the authorization of each above-listed employee for HISD to obtain and review the employee's personal criminal history records to assist with determining the employee's eligibility to provide services at HISD in connection with Vendor's contract with HISD.

Signature of Authorized Representative _____ Date _____ Name & Title of Authorized Representative _____ Taxpayer Identification Number _____