

Vendor Name: _____

ARLINGTON INDEPENDENT SCHOOL DISTRICT

PURCHASING DEPARTMENT

*Sherry Ellis
Purchasing Coordinator*

RFP NO. 12-28

ANNUAL CONTRACT FOR INTERPRETER SERVICES

RFPS DUE:	NOVEMBER 3, 2011
DUE AT:	2:00 PM
OPENED AT:	2:00 PM

**PLEASE SEND TWO (2) COPIES OF YOUR RFP RESPONSE –
AN ORIGINAL COPY AND ONE (1) ADDITIONAL COPY.**

**IF YOUR COMPANY WOULD LIKE A TABULATION, PLEASE
E-MAIL ME AT sellis@aisd.net TO REQUEST A COPY –
TABULATIONS WILL BE RELEASED AFTER BOARD
APPROVAL. (RESULTS WILL NOT BE GIVEN OVER THE
PHONE.)**

ARLINGTON INDEPENDENT SCHOOL DISTRICT

1203 West Pioneer Parkway

Arlington, Texas 76013

**OFFICE OF:
PURCHASING COORDINATOR**

Bidders and Vendors:

The Board of Education of the Arlington Independent School District will receive sealed RFPS in the office of the purchasing coordinator, 1203 West Pioneer Parkway, Arlington, Texas, as per attached specifications.

The Arlington Independent School District agrees to use diligent efforts to purchase all goods and services from businesses within the boundaries of the Arlington Independent School District whenever such goods and services are comparable in availability, quality and price. The district encourages contractors, in performing the contract, to implement the same policies.

The Arlington Independent School District awards all bids in accordance with Texas Education Code, Section 44.031.

The Arlington Independent School District reserves the right to reject any or all bids and to waive any formality or irregularity and to make the award of the contract in the best interest of the Arlington Independent School District.

The District reserves the right to enforce the performance of this contract in any manner prescribed by law or deemed to be in the best interest of the District in the event of breach or default of this contract. The District reserves the right to terminate the contract immediately in the event the successful bidder fails to meet schedules or otherwise perform in accordance with these specifications. Breach of contract or default authorizes the District to purchase the service from the next low bidder or elsewhere, and charge the full increase in cost and handling to the defaulting successful bidder.

Literature on items bid is desirable and samples may be required.

Any item which does not perform or meet tests as specified or claimed by the seller will be replaced at no cost to the school district. All discounts shall be listed on the bid form. Payment will be made only after satisfactory delivery and/or installation. Transfer or assignment of contracts by seller is prohibited.

You may bid on any or all items, but please bid by item, using the attached forms for your proposal.

In submitting your RFP, please mark on the outside of the envelopes

RFP NUMBER 12-28.

This RFP must be in the office of the purchasing coordinator no later than

2:00 P.M., NOVEMBER 3, 2011.

ALL RFP PRICES MUST BE F.O.B. ARLINGTON.

Thank you for your response to this RFP.

Sincerely,

Sherry Ellis
Purchasing Coordinator

**Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013**

RFP 12-28

GENERAL BID REQUIREMENTS

1. Delivery shall be made as soon as possible. Payment will be made by Purchaser after satisfactory delivery.
2. All quotations shall include freight to purchaser's designated locations within the School District.
3. All qualified vendors will be able to provide interpreter services or whatever is in the best interest of the District.
4. All quantity and prompt payment discounts shall be listed on the bid form.
5. Quantities are estimates only and may be increased or decreased: your bid shall be firm **FOR ONE YEAR FROM DATE OF BOARD APPROVAL (NOVEMBER 17, 2011) WITH THE OPTION TO RENEW FOR TWO ADDITIONAL ONE YEAR PERIODS.**
6. Specifications on the items you are bidding are desirable and samples may be required.
7. Past performance, seller's location, and availability of stock and representative will be considered in award of the RFP.
8. Any item that does not perform or meet test as specified or as claimed by the seller will be replaced at no cost to purchaser.
9. Transfer or assignment of contracts by seller is prohibited.
10. The School District reserves the right to accept or reject quotations on each item separately or as a whole.
11. Title to the material shall pass to the Arlington Independent School District upon receipt by the school district.
12. Checks will be issued to the vendor awarded the contract. Request for joint-pay checks will not be honored.
13. **All RFP openings are not public and bid results will not be given over the telephone.**

NAME OF COMPANY	AUTHORIZED SIGNATURE	PRINTED SIGNATURE	
ADDRESS	CITY	STATE	ZIP
PHONE NUMBER	FAX NUMBER	DATE	
12-28			
RFP NUMBER	PAYMENT TERMS	E-MAIL ADDRESS	

**Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013**

RFP 12-28

VENDOR “NO BID” NOTICE

Dear Vendor:

If you decide not to submit an RFP on this project, please complete this form, fold, seal and attach proper postage and return to AISD. You may fax this notice to AISD at: (817) 459-7246. We must receive this form before the opening date and time.

****DO NOT FILL OUT THIS FORM IF YOU ARE SUBMITTING AN RFP TO
ARLINGTON ISD****

COMPANY NAME:	
ADDRESS:	
COMPANY PHONE #:	
COMPANY FAX #:	
BID/PROJECT #:	12-28
BID OPEN DATE:	11-3-11
REASON FOR NOT SUBMITTING A BID:	
DATE:	
SIGNATURE:	
PRINTED NAME:	
TITLE:	

**Thank you for your assistance.
AISD Purchasing Office**

**Arlington Independent School District
1203 W. Pioneer Parkway
Arlington, TX 76013**

FORMS CHECKLIST

Please place a checkmark next to the following items.

- _____ Completed – Felony Convictions Disclosure Statement (**Required, must be in bid package.**)
- _____ Completed – Historically Underutilized Business (HUB) (**Required, must be in bid package.**)
- _____ Completed – Debarment Form (**Required, must be in bid package.**)
- _____ Completed – W-9 Form (**Required, must be in bid package.**)
- _____ Completed – Conflict of Interest (**If, Applicable**)
- _____ Completed – Current Certificate of Liability Insurance w/Workmans' Compensation Coverage (**Required, unless already on file with AISD**)

**Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013**

RFP 12-28

Felony Conviction Notification

State of Texas Legislative Senate Bill No. 1, 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.

**This notice is not required of a publicly-held corporation.
Please complete the information below:**

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

Vendor’s Name:_____

Authorized Company Officials’ Name (Please print or type):_____

- A. My firm is a publicly-held corporation; therefore, this reporting requirement is not applicable:**

Signature of Company Official:_____ **Date:**_____

- B. My firm is not owned nor operated by anyone by anyone who has been convicted of a felony.**

Signature of Company Official:_____ **Date:**_____

- C. 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:**_____

Arlington Independent School District
1203 W. Pioneer Parkway
Arlington, TX 76013

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HISTORICALLY UNDERUTILIZED BUSINESS (HUB) CERTIFICATION

Bidding companies that have been certified by the Texas Building and Procurement Commission (TBPC) as Historically Underutilized Business (HUB) entities are encouraged to indicate their HUB status when responding to this Bid Invitation. The electronic catalogs will indicate HUB certification for vendors that properly indicate and document their HUB certification on this form.

_____ I certify that my company has been certified by the Texas Building and Procurement Commission as a Historically Underutilized Business (HUB), and I have attached a copy of our HUB Certification to this form.
(Required documentation for recognition as a HUB).

_____ My company has NOT been certified by the Texas Building and Procurement Commission as a Historically Underutilized Business (HUB).

Signature of Authorized Representative

Name (Please Print)

Title

Company Name (Please Print)

**Arlington Independent School District
1203 W. Pioneer Parkway
Arlington, TX 76013**

RFP 12-28

SUSPENSION OR DEBARMENT CERTIFICATE

Non-Federal entities are prohibited from contracting with or making subawards under covered transactions to parties that are suspended or debarred or whose principals are suspended or debarred. Covered transactions include procurement for goods or services equal to or in excess of \$100,000.00. Contractors receiving individual awards for \$100,000.00 or more and all subrecipients must certify that the organization and its principals are not suspended or debarred.

By submitting this offer and signing this certificate, the bidder :

- Certifies that the owner/operator has not been convicted of a felony except as indicated on separate attachment to this offer, in accordance with Sec. 44.034, Texas Education code, and
- Certifies that no suspension or disbarment is in place, which would preclude receiving a federally funded contract under the Federal OMB, A-102, Common Rule(____.36)

Vendor Name : _____

Vendor Address : _____

Vendor E-mail Address : _____

Vendor Telephone : _____

Authorized Company Official's Name : _____

(Printed)

Signature of Company Official : _____

Date : _____

Request for Taxpayer Identification Number and Certification

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

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax

classification (required): ☐ Individual/sole proprietor ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶

☐ Exempt payee

☐ Other (see instructions) ▶

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code

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 the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

			-			-				
--	--	--	---	--	--	---	--	--	--	--

Employer identification number

			-							
--	--	--	---	--	--	--	--	--	--	--

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below).

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 on page 4.

Sign
Here

Signature of
U.S. person ▶

Date ▶

General Instructions

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

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

CONFLICT OF INTEREST

Effective January 1, 2006, Chapter 176 of the Local Government Code requires a person who contracts or seeks to contract with the Arlington Independent School District for the sale or purchase of property, goods, or services to file a conflict of interest questionnaire with the District. The questionnaire must be filed no later than the seventh business day after the date that the person: (1) begins contract discussions or negotiations with the district or (2) submits to the District a response to a request for proposal or bid, correspondence, or another writing related to a potential agreement with the District.

An updated conflict of interest questionnaire must be filed no later than September 1 of each year in which the person: (1) has begun contract discussions or negotiations with the District or (2) submits to the District an application, response to a request for proposals or bids, correspondence or another writing related to a potential agreement with the District; and (3) the seventh business day after the date on an event that would make a statement in the questionnaire incomplete or inaccurate. The updated questionnaire is not required if the person has filed an updated questionnaire on or after June 1, but before September 1 of that year.

It is the vendor's responsibility to interpret the requirements of Chapter 176 of the Local Government Code.

The conflict of interest questionnaire MUST be completed and SUBMITTED on-line at: <http://www.aisd.net/conflict/register.asp>. (please see note below)

If you have already submitted your application on-line please go to this web site

<http://www.aisd.net/conflict/LogIn.asp> and verify if there are any changes.

The District will post all conflict of interest questionnaires on its website.

PLEASE NOTE: Vendors need to fill out this form ONLY IF A CONFLICT EXISTS.

If no conflict exists, please put "no conflict exists" on the forms checklist page.

INSURANCE REQUIREMENTS

The successful bidder, or proposer, shall provide and maintain insurance in a company rated no less than “ A” by A.M. Best and Company, and in a company licensed to sell insurance as an “ admitted carrier” in the State of Texas. Said insurance shall be evidenced by a Certificate of Insurance (standard ACCORD form) delivered to the District, or its designated representative, indicating the limits of coverage, naming the Arlington Independent School District as an additional insured on all policies except workers’ compensation, and adding a waiver of subrogation endorsement on the workers’ compensation, automobile liability, and general liability policies. The Arlington Independent School District, 1203 W. Pioneer Parkway, Arlington, Texas 76013, shall be shown as certificate holder. Certificate(s) of Insurance shall describe any material endorsements, exclusions, or deductible provisions which substantially alter coverage under the listed policies. Coverage and limits of liability shall be as follows:

Classes of Risk

Class A Contracts – Jobs with a minimum of hazards and/or low revenue. “ Minimum hazard” means general work not involving work more than six feet above ground or floor level, and not requiring the use of any heavy equipment.

Examples: Business machine repairs
Locksmiths
Technicians working for major manufacturers
Consulting engineers and architects on District premises or job site
Venetian blind or shade service
Phone or coaxial cable installation (not below ground)

Insurance requirements:

<u>Workers’ Compensation</u>	Statutory
<u>Employers’ Liability–</u>	
B.I. by accident	\$500,000/accident
B.I. by disease	\$500,000/person
B.I. by disease	\$500,000/aggregate

General Liability

\$500,000 aggregate
\$500,000 products/completed ops.
\$500,000 personal injury/advertising
\$500,000 per occurrence
\$100,000 fire damage

Automobile Liability

Bodily Injury	\$250,000 per person \$500,000 per accident
Property Damage	\$250,000 per accident

Or

Combined Single Limit	\$1,000,000 per accident
Hired & Non-Owned Auto	same limit as owned autos

**Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013**

RFP 12-28

**ANNUAL CONTRACT FOR INTERPRETER SERVICES
SPECIFICATIONS**

The purpose of this RFP is to provide the Arlington Independent School district with the use of outside interpreter services for the term of the contract.

Services are to include, but are not limited to the following:

- Interpretation services for the auditory impaired. This will include any type event and companies must be able to provide interpreters 365 days a year. Services may be for students, staff or parents.
- Interpretation services for the auditory impaired must be certified for students.
- Locations for interpretation services for the auditory impaired can be on any Arlington ISD campus or at another venue. If services are performed on an Arlington ISD campus, your company must provide the district with a current certificate of liability insurance (specifications attached).
- The district is also looking for written or verbal translating and/or written service providers. This will include any type event and companies must be able to provide interpreters 365 days a year. Services may be performed for meetings, evaluations, and parent conferences.
- Locations for the written or verbal translating and/or written services will be performed on an Arlington ISD campus. When services are performed on an Arlington ISD campus, your company must provide the district with a current certificate of liability insurance (specifications attached.) Written translating services could occur at the company location.

Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013

RFP 12-28

**ANNUAL CONTRACT FOR INTERPRETER SERVICES
RFP FORM**

VENDOR MUST RETURN SIGNED RFP FORM WITH ANY ATTACHMENTS.

Questions regarding this RFP should be directed to Sherry Ellis via fax at 817-459-7246 and will be answered in writing via fax (Phone #682-867-7351). Any changes to the RFP specifications will be issued in written addenda.

This RFP is for all LABOR, PARTS, AND SUPPLIES for interpreter services for the Arlington Independent School District. This is a qualifying bid only – there are no particular jobs required as of this moment. When your company submits this RFP to the AISD, you are placed on our approved vendor list. All services will be performed on an as-needed basis only.

A current copy of your company's certificate of liability insurance (as per attached) needs to accompany your RFP, unless the AISD has a current certificate on file. Please call 682-867-7223 to verify the district has your certificate on file. (Please note: the certificate we have on file MUST include everything listed on the attached specimen. If it does not include everything, your company will be required to submit a complete certificate with your bid.)

If your company calls to verify the district has your certificate on file, please complete the following:

Verified certificate on file with AISD with whom: _____ (name)

Verified certificate on file with AISD on: _____ (date)

The estimated expenditure for this contract is approximately \$495,000.00 per year. However, this estimate should not be construed to be a guarantee of either minimum or maximum since usage is dependent upon actual needs and available funding.

Labor Charge Per Hour (For Monday – Friday 8:00 AM to 5:00 PM) \$ _____

Labor Charge Per Hour (For After Hours Work, Weekends, Etc.) \$ _____

NOTE: State law prohibits bidders from faxing bid responses. You may wish to overnight or federal express your response to this bid invitation. You also may hand carry your response to the purchasing department.

BID FORM

**Arlington Independent School District
1203 West Pioneer Parkway
Arlington, Texas 76013**

RFP 12-28

The undersigned hereby offers to provide the articles/services specified above at the prices and terms stated. Net price must include inside delivery and freight. The Arlington Independent School District (AISD) is exempt from all federal excise taxes and state sales tax. This quotation may be withdrawn after the specified time. AISD reserves the right to accept or reject in part or in whole any quotations submitted and to waive any technicalities for the best interest of AISD.

FUNDING OUT PROVISION:

If Arlington Independent School District fails to appropriate funds to provide for the annual funding of the contract (RFP 12-28), the AISD may terminate the contract, without termination charges, provided the contractor receives at least thirty (30) days prior written notice of the termination stating the non-appropriation of funds as the reason for termination.

OPTION TO EXTEND CONTRACT:

The Arlington Independent School District reserves the right to extend the contract (Request for Proposal 12-28) for two additional one year periods. Any request for a price increase or decrease in fiscal year 2012-13, and 2013-14 will be considered by the Arlington ISD based upon an increase of the Consumer's Price Index (CPI) ending in October 2012 and 2013.

NAME OF COMPANY		AUTHORIZED SIGNATURE	PRINTED SIGNATURE
ADDRESS		CITY	STATE
			ZIP
PHONE NUMBER		FAX NUMBER	DATE
12-28			
RFP NUMBER	PAYMENT TERMS		E-MAIL ADDRESS