

LA PORTE INDEPENDENT SCHOOL DISTRICT (LPISD)  
 CONTRACTOR CRIMINAL HISTORY RECORD CERTIFICATION

**Introduction:** Texas Education Code Chapter 22 requires entities that contract with school districts to obtain criminal history records on covered employees/themselves. Covered employees with disqualifying criminal histories are prohibited from serving at a school district. To the extent possible, contractors/individuals must certify to the district that they have complied and must obtain similar certifications for their subcontractors. If a contractor employee or individual requires a criminal history review that cannot be obtained by the contractor/individual, the contractor/individual agrees to cooperate by providing all information required, including fingerprinting, for LPISD to obtain the criminal history. For more information or to set up an account, a contractor should contact the Texas Department of Public Safety's Crime Records Service at 512-424-2474 (option 2 or [FACT@txdps.state.tx.us](mailto:FACT@txdps.state.tx.us)).

**Definitions:** *Covered employees:* Employees of a contractor who have or will have continuing duties related to the service to be performed at the District and have or will have direct contact with students. *Disqualifying criminal history:* (1) a conviction or other criminal history information designated by the District; (2) a felony or misdemeanor offense that would prevent a person from obtaining certification as an educator under Texas Education Code §21.060, including an offense listed at 19 Tex. Admin. Code §249.16; or (3) one of the following offenses, if at the time of the offense, the victim was under 18 or enrolled in a public school: (a) a felony offense under Title 5, Texas Penal Code; (b) an offense for which a defendant is required to register as a sex offender under Chapter 62, Texas Code of Criminal Procedure; (c) an equivalent offense under federal law or the laws of another state.

<b>Section 1</b>	<p>Vendor: _____          (Name)</p> <p>_____</p> <p style="text-align: center;">(Address/City/State/Zip)</p> <p>CSP/Quote/Contract Number and Contract Dates: _____</p> <p><b>Answer Y for Yes or N for No:</b></p> <p>_____ Will employees, including you, have continuing duties related to the purpose of contract named above or any other services performed at LPISD?          Until further guidance is received, LPISD considers "continuing duties" to mean repetitive work duties rather than a onetime appearance or engagement.</p> <p>_____ Will those employees, including you, have direct contact with students?          Until further guidance is received, LPISD considers "direct contact" to mean services/activities that provide substantial opportunity for verbal or physical interaction with students and that is not supervised by a certified educator or other professional district employee. Examples include unsupervised coaching, tutoring, or other services to students.</p> <p>If either question is answered "no" vendor should complete section 2 of this form.</p> <p>If answer to both questions is "yes", vendor should complete section 3 of this form.</p>
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Fill and sign either Section 2 **OR** Section 3, per the instructions above.

<b>Section 2</b>	<p>None of the contractor's employees are <i>covered employees</i>, as defined above. I further certify that Contractor has taken precautions or imposed conditions to ensure that its employees will not become <i>covered employees</i>. Contractor will maintain these precautions or conditions throughout the time the contracted services are provided.</p> <p>_____</p> <p>Signature of Vendor <span style="margin-left: 200px;">_____</span>          Date</p> <p>_____</p> <p>Print name</p>
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<b>Section 3</b>	<p>I _____, agree to provide the District with the name and any other requested information of all covered employees of contractor and/or any subcontractor so that the District may obtain criminal history record information on the covered employees. If the District objects to the assignment of a covered employee on the basis of the covered employee's criminal history record information, I agree to discontinue using that covered employee to provide services at the District. Failure to comply may be grounds for contract termination</p> <p>_____</p> <p>Signature of Vendor <span style="margin-left: 200px;">_____</span>          Date</p> <p>_____</p> <p>Print Name</p>
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