Garza-Long

BOERNE INDEPENDENT SCHOOL DISTRICT

CONSULTANT SERVICES AGREEMENT

.1 The BOERNE INDEPENDENT SCHOOL DISTRICT hereinafter referred to as the "District" and Independent Contractor, _____ hereinafter referred to as "Consultant," enter into a agreement/contract on this the 17th day of October, 2026 for the provision of consultant services. All consultants, who perform duties where students are regularly present, are required to complete a criminal history authorization form prior to performing the service described in Sec. 2.1.

.1 The District agrees to engage the Consultant and the Consultant agrees to perform personally in a manner satisfactory to the District, the following services (describe the services to be performed):
Judge at CHS Debate Tournament

1 The District agrees to pay Consultant $ 150 per day as compensation for services rendered. Consultants shall not be paid in advance.

1 Unless discontinued earlier by the District, the services are to be performed on the following dates and times:
10/17/26

1 List the name of the BISD campus(es) that you will serve:
CHS - Debate Tournament

1 **Term and Termination:** This contract will remain in full force from July 1 to June 30 of the fiscal year in which the contract was signed. All Consultant services agreements/contracts will terminate on June 30th. Consultants will be required to submit a new agreement for each fiscal year. This agreement may be terminated by the District at any time without cause and without penalty to the District. In the event of termination by the District or the Consultant prior to completion of the contract, compensation shall be prorated on the basis of hours actually worked, and the Consultant shall only be entitled to receive just and equitable compensation for any satisfactory work completed up to the date of termination.

1 Consultants may not assign this contract to a third party without consent of the District.

1 The Consultant is not an employee of the District, is not entitled to fringe benefits, pension, worker's compensation, retirement, etc. The District shall not deduct Federal Income Taxes, FICA (Social Security), or any other taxes required to be deducted by an employer, as this is the responsibility of the Consultant.

1 The Consultant agrees to hold the District harmless from any and all liability incurred by the District by reason of the Consultant's negligence or breach of contract including, without limitation, damages of every kind and nature, out-of-pocket costs and legal expenses.

).1 The District requires compliance with executive order 11246, entitled Equal Employment Opportunity, as amended by executive order 11375, and as supplemented in Department of Labor regulation (41 CRF Part 60), OMB Circular A-102 Common Rule and its Attachment O and P supplements; the Code of Federal Regulations (CFR); the Common Law; and TEA-FINANCIAL ACCOUNTING SYSTEM RESOURCE GUIDE.

.1 The Consultant shall retain any books, documents, papers and records which are directly pertinent to this contract. The Consultant shall make the said materials available for audit, examination, excerpt and transcription to the district, sub-grantee or grantee of funds, or their authorized representatives, for the term of the contract and a period of five years following termination of the contract.

l This contract does not represent a Purchase Order. Only a duly authorized Purchase Order represents authorization to provide the services described in Section 2.1 of this contract.

13.1 Consultant attests that they are not an employee of the District and that no employee of the District will have a direct financial interest in the agreement.

BISD Policy CJ (Local)

Prohibited Classroom Instruction or Activities

A District contractor is prohibited from intentionally or knowingly engaging in or assigning to another individual instruction, guidance, activities, or programming prohibited by law [see EMB(LEGAL)]. Violation of this policy shall result in termination of the contract. A District contractor shall be permitted to appeal this action in accordance with GF(LOCAL).

Prohibition on Diversity, Equity, and Inclusion

A contract is subject to termination if the District contractor intentionally or knowingly:

- Engages in diversity, equity, and inclusion (DEI) duties.
- Assigns to another individual DEI duties.

SIGNATURES:

Boerne ISD:

[signature] 9-4-26

Signature of Authorized Department Head/Principal/Director — Date

CHS

Campus/Department

Consultant:

Print Name of Consultant

Signature of Consultant — Date

Social Security/Tax Identification Number

Address of Consultant

Phone #_____ Fax #_____

Email Address:_____

Required Forms: All of the forms listed below are REQUIRED. Do not mark any forms as not applicable and do not leave any blank. The agreement/contract will be denied if all forms are not completed.

- Consultant Services Agreement
- DPS Computerized Criminal History (CCH) Verification Form
- Pre-Employment or Pre-Service Affidavit for Educational Entities
- W9
- Conflict of Interest
- Felony Conviction Notice
- Debarment

Optional Form:

- ACH (Automated Clearing House)

BOERNE
INDEPENDENT SCHOOL DISTRICT

BUSINESS & FINANCE

8/24/2026

RE: Notification of Disciplinary Policies and Procedures Pursuant to SB 12

Dear Boerne ISD Contractor,

Pursuant to Senate Bill 12 of the 89th Legislature, the District is required to notify all contractors of potential disciplinary consequences for violation of Texas Education Code Section 11.005(c) Prohibition of Diversity, Equity, and Inclusion Duties and Texas Education Code Section 28.002(h), Certain Instruction Requirements and Prohibitions.

Any contractor who is in violation of Section 11.005 shall be subject to the District's disciplinary policies and procedures as found in Board Policy, including but not limited to Board Policy BT & CJ. In accordance with Section 11.005, no contractor shall intentionally or knowingly engage in or assign to another person diversity, equity, and inclusion duties.

Any contractor who is in violation of Section 28.002 shall be subject to the District's disciplinary policies and procedures as found in Board Policy, including but not limited to Board Policy BT & CJ. In accordance with Section 28.002, a contractor for the District may not engage in any of the prohibited activities regarding course curriculum and other instructional requirements.

Boerne ISD will provide a physical copy of this form to a contractor upon request. Please contact Eddie Ashley at eddie.ashley@boerneisd.net if you would like a physical copy mailed to you.

Sincerely,

Wes Scott
Chief Financial Officer
Business & Finance

THIS FORM IS NOT TO BE USED AS A CONSENT/AUTHORIZATION FORM.
Agency to retain this CCH Verification Form for DPS auditing purposes.

DPS Computerized Criminal History (CCH) Verification Form

Section 1: Applicant must acknowledge the information in Section 1. Signature & date required.

Applicant Name (Print):	

I acknowledge that a Computerized Criminal History (CCH) check may be performed by accessing the Texas Department of Public Safety Secure Website and may be based on name and DOB identifiers. Authority for this agency to access an individual's criminal history data may be found in Texas Government Code 411, Subchapter F https://statutes.capitol.texas.gov/.

Name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history record information (CHRI), therefore the organization conducting the criminal history check is **not** allowed to discuss with me any CHRI obtained using the name and DOB method. The agency may request that I also have a fingerprint search performed to clear any misidentification based on the result of the name and DOB search.

In order to complete the fingerprint process, I must make an appointment with the Fingerprint Applicant Services of Texas (FAST) as instructed online Crime Records General Information | Department of Public Safety (texas.gov) Review of Personal Criminal History or by calling the DPS Program Vendor at 1-888-467-2080, submit a full and complete set of fingerprints, request a copy be sent to the agency listed below, and pay a fee of $25.00 to the fingerprinting services company.

Once this process is completed the information on my fingerprint criminal history record may be discussed with me. **Acknowledge by signing below.**

Applicant Signature:	Date:

Section 2: Agency use only. Must be completed by authorized personnel conducting search.

Agency Name:
Authorized User:
Signature of Authorized User:
Date of Name-Based CCH Search:

Section 3: Agency use only. CHRI Name Based Tracking information. Check all that apply.

Purpose for CHRI Search.	☐ Applicant ☐ Volunteer ☐ Contractor ☐ Other:
Is any part of the Criminal History Record Information (CHRI) stored by agency?	Reminder: DPS does not recommend storing any part of CHRI. ☐ NO, CHRI is not stored by agency. ☐ YES, CHRI is stored by agency.
CHRI Retention Period	☐ Temporarily Only ☐ Annual ☐ None Stored/Saved ☐ Other:
CHRI Storage Method	☐ Physical/Printed (paper copy) ☐ Digital/Electronic (saved anywhere on device/computer)
CHRI Retention Purpose	Explain:
Date CHRI Destroyed	
Destruction Method	Explain:

CHRI + Audit Resources Link

PRE-EMPLOYMENT OR PRE-SERVICE AFFIDAVIT FOR EDUCATIONAL ENTITIES

*Pursuant to Texas Education Code (TEC) §22A.055, a person applying for employment with or who will act as a service provider for an educational entity (school district, district of innovation, open-enrollment charter school, other charter entity, regional education service center, or shared services arrangement) **must** submit, using a form adopted by the agency, a pre-employment or pre-service affidavit.*

*The TEC §22A.055 affidavit requirement applies to all prospective employees and to service providers whose roles involve **direct contact or interaction with students**. The completion of a TEC §22A.055, affidavit is not required for individuals whose job duties do not fall into this category.*

Section 1 – Disclosure of Work History and Consent for Release of Records

Item	Response Selection
1. Have you previously been employed by or acted as a service provider for, or are you currently employed by or currently acting as a service provider for, a public or private school?	Yes ☐ No ☐
2. Do you consent to the release of your employment records as described below? *Pursuant to TEC §22A.055, a person applying for employment with or who will act as a service provider for an educational entity must consent for release of the person's employment records.*	Yes ☐ No ☐

Section 2 – Disclosure of Investigation or Placement on the Do Not Hire Registry

Item	Response Selection
3. Have you ever been terminated, non-renewed, or discharged from employment by a public or private school?	Yes ☐ No ☐
4. Have you ever resigned with a public or private school in lieu of being terminated or discharged?	Yes ☐ No ☐

Item	Response Selection
5. Have you ever been investigated by a law enforcement or child protective services agency for, or charged with, adjudicated for, or convicted of, an offense involving the following conduct described by TEC §22A.051(a)(2)(A), (B), (C), or (D): • abused or otherwise committed an unlawful act with a student or minor, including by engaging in conduct that involves physical mistreatment or constitutes a threat of violence to a student or minor and that is not justified under Chapter 9, Penal Code, regardless of whether the conduct resulted in bodily injury; • was involved in or solicited a romantic relationship with or solicited or engaged in sexual contact with a student or minor; • engaged in inappropriate communications with a student or minor, as defined by board rule; or • failed to maintain appropriate boundaries with a student or minor, as defined by board rule? *Adjudicated and convicted refer to a conviction, plea of guilty or no contest (nolo contendre), probation, suspension, or deferred adjudication.* *Charged refers to a formal criminal charge as documented by a primary charging instrument (a complaint, information, or indictment) under the Texas Code of Criminal Procedure.*	Yes ☐ No ☐
6. Have you ever been investigated by a licensing authority or had a license, certificate, or permit denied, suspended, revoked, or otherwise sanctioned in this state or another state for conduct described by TEC §22A.051(a)(2)(A), (B), (C), or (D), which is described above?	Yes ☐ No ☐
7. Are you currently the subject of an inquiry, disciplinary action, review, or investigation, by a public or private school, a teacher-licensing agency, a law enforcement agency, or a court in Texas or another state in connection with alleged misconduct?	Yes ☐ No ☐
8. Have you ever been listed on the Texas Education Agency's Do Not Hire Registry under TEC §22A.151?	Yes ☐ No ☐

If you answered Yes to any question in Section 2, provide all relevant facts known to you pertaining to the matter, including, if applicable, whether the allegation was determined to be true or false.

Section 3 – Declaration of Applicant

A person commits an offense, a Class B misdemeanor if the person fails to disclose information required to be disclosed in this affidavit under TEC §22A.055. Additionally, a determination that an employee or person providing services failed to disclose information required by TEC §22A.055 is grounds for termination of employment or services.

By signing below, I affirm that the information and responses provided in this affidavit are true, complete, and correct to the best of my knowledge.

Name (First, Middle, Last) _____ Date of Birth _____

Address (House/Unit # and Street Name) _____

Address (City, State, Zip Code) _____ County _____

Signature _____ Date Signed _____

Form **W-9**
(Rev. November 2017)
Department of the Treasury
Internal Revenue Service

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.

Print or type. See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

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

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ 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 FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

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. Also see *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:

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); and
4. 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*.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, *later.*

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.

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.

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

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

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 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.

, 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 Official's Name (Printed):_____

Check one of the following and sign as appropriate.

☐ My firm is a publicly held corporation; therefore, this reporting requirement is not applicable.

☐ My firm is not owned or operated by anyone who has been convicted of a felony.

☐ 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:_____

VENDOR DEBARMENT STATEMENT

I have read the conditions and specifications provided in the bid document attached.

I affirm, to the best of my knowledge, the company I represent has not been debarred or suspended from conducting business with School districts in the State of Texas. This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulation may be obtained by contacting the Department of Agriculture Agency with which this transaction originated.

_____

Name of Company (Please Type/Print)

_____

Mailing Address City State Zip

_____

Printed Name (Please Type/Print)

_____ _____

Signature Title

_____ _____ _____

Telephone Number Fax Number Date

Boerne Independent School District

235 Johns Rd.
Boerne, Texas 78006

Automated Clearing House Agreement (ACH)
(PAYMENT BY ACH)

Boerne ISD is now offering payment by ACH direct deposit to all vendors to increase efficiency and improvethe quality of services. Payments by ACH are deposited directly into your bank account. Please complete the formbelow and return to the Business Office by mail to address above, Attention: Purchasing or email to purchasing@boerneisd.net.

Original Request: ☐	Change Request: ☐	Termination Request: ☐

Section 1- Vendor Information

Vendor Name:
Address:
City/State/Zip: Phone:
Last 4 digits of EIN or SSN (to verify vendor identification):
Email Address for Notification of Deposit (required):

Section 2 – Bank Account Information (contact bank ACH department for correct routing number)

Financial Institution Name:
Financial Institution Address:
Routing Number for ACH:
Vendor's Bank Account Number:
Type of Account: Checking: ☐ Savings: ☐

Section 3 – Authorization

I authorize Boerne ISD to credit my account with the above-named financial institution. If the district should erroneously deposit funds into my account, upon notification by the district I will authorize the necessary debit entries to correct the error, not to exceed the amount deposited in error.
This authorization will remain in effect until the district has received written notification to terminate. A new authorization form must be completed if the above-name bank account is closed, or if vendor wished to designate a new back account to received funds. Failure to notify Boerne ISD of a closed account will cause a delay in receivingpayments.
Print Name: **Title:**
Signature: **Date:**

To ensure accuracy, please attach a voided check for the above account. If a voided check is not attached, it is theresponsibility of the vendor to ensure information is accurate. Incorrect information may delay receipt of funds.