

**Austin Independent School District**

# RFQ HUB Compliance Plan (HCP)

**Solicitation Number & Name: 18RFQ118 – Rosedale & New Northeast MS (DB)\_\_\_\_\_**

**Name of Prime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Name & Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is your firm a certified HUB?    ☐ Yes   ☐ No \*HUB Category: \_\_\_\_\_\_\_**

**Historically Underutilized Business HUB Ethnic Category**

**African American (AA) 1.7%**

**Asian/Native American (A/NA) 1.9%**

**Hispanic (H) 8.1%**

**Female (WBE) 10.2%**

**List each proposed scope and firm name below. Complete all information for each firm listed, including the area of work. Please list Prime firm first, certified subs, then non-certified subs. Prime MUST verify certification status for subs listed. Certifications accepted are State of Texas HUB and City of Austin. ANY substitutions/additions/deletions of a proposed sub listed below is subject to approval by AISD Exec. Dir. of Construction Management & HUB Program Dir. in accordance with Austin ISD Historically Underutilized Business Program Guidelines.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Prime/Subcontractor(s)/Supplier(s)** | **Area of Work** | **Address** | **Proposed Amount** | **\*HUB**  **Code** | **Local**  **(Y/N)** | **Small**  **(Y/N)** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **\*HUB Codes: AA-African American; H-Hispanic; A/NA-Asian/Native American; WBE-Women Business**  **Enterprise; MBE-Minority Business Enterprise; NON-Not Certified** | | | | | | |

**\*\*Please use back of this form to list additional subcontractor(s)/supplier(s), if needed.**