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|  | DIVISION OF VOCATIONAL REHABILITATION (DVR)  **DSHS / DVR Request for Approval to Subcontract Checklist** | | |
| CONTRACTOR’S NAME | | | CONTRACT NUMBER |
| CONTRACTED SERVICES TO BE PROVIDED | | | |
| PROPOSED SUBCONTRACTOR’S NAME | | | |
| The undersigned Contractor has verified, and hereby certifies, that the proposed subcontractor named above meets the following criteria for DSHS approval to subcontract. **The proposed contractor:**   * Has the qualifications required under the Contract to provide services.  Yes  No  Not applicable * Has staff who meet the qualifications required under the Contract who will provide services.  Yes  No  Not applicable * Has liability insurance coverage and in the amounts as required under the Contract.  Yes  No  Not applicable * Has agreed to adhere to all confidentiality and data security obligations in the Contract.  Yes  No  Not applicable   Explain any “No” or “Not applicable” responses to the above (attach a separate sheet if necessary). | | | |
| Contractor understands and acknowledges, by signing below, that:   * Contractor shall ensure, and shall require of its subcontractor, that services provided by the subcontractor are provided in accordance with the terms and conditions of the Contract; and Contractor is responsible for the acts and omissions of the subcontractor.1 * Contractor shall ensure that the subcontractor and subcontractor’s staff who will have unsupervised access to children or vulnerable adults served under the Contract have each completed and received a satisfactory background check before providing services to DSHS clients, as required under the Contract.2 * Contractor shall ensure that the subcontractor has and maintains insurance with the same types and limits of coverage as required of the Contractor under the Contract.3 * Contractor is responsible to ensure that all terms, conditions, assurances and certifications set forth in this Contract are included in the subcontract,4 including all confidentiality and data security requirements.5 * All contract terms in the above-referenced contract remain in full force and effect and nothing in this Checklist shall be construed as waiver of terms in the above-referenced Contract. * DSHS has the right to withdraw approval for subcontracting if terms of the Contract are not adhered to. | | | |
| CONTRACTOR’S SIGNATURE DATE | | TITLE | |
| DVR APPROVING MANAGER’S SIGNATURE DATE | | PRINTED NAME AND TITLE | |
| 1 Subcontracting section and Indemnification and Hold Harmless section, General Terms and Conditions  2 Background Checks section, Exhibit  3 Subcontractors subsection of Insurance section, Special Terms and Conditions  4 Subcontracting section, General Terms and Conditions  5 These include Confidentiality section, General Terms and Conditions and Data Security Requirements Exhibit | | | |