BOARD OF TRUSTEES AGENDA

			AGEI			
		Workshop	/	Regular		Special
		Report Only				Recognition
Pres	enter(s)):				
Brie	fly desc	ribe the subje	ct of the repo	rt or recog	nition preser	itation.
	✓		RES, DEPUTY S		URRICULUM & II	NSTRUCTION
): DELIA GONZA		EDUCATION I	DIRECTOR	
CON	ISIDER A	ND TAKE APPRO	PRIATE ACTIC			PPROVE 2016 SCHOOL YEAR
			·			
Eun	dina cou	ırce: Identify t	he cource of	funds if an	w are require	od.
168-	STATE FO	UND	ile source of	iunus II dii	y are require	100
<u></u>						
	ification item.	: Explain any	question or is	ssues that	might be rais	ed regarding
<u>this</u>	ICCIII.					
IMF		ATION OF REQU	IRED SERVICE	S FOR STUE	DENTS RECEIV	ING SPECIAL



Eagle Pass Independent School District Special Education Department

587 Madison St. Eagle Pass, Texas 78852

Tel #:(830)758-7023 Fax #:(830)757-1800 Main Office Fax #:(830)758-7237 Request for Records

TO:

Gilberto Gonzalez, Superintendent of Schools

FROM:

Delia Gonzalez, Special Education Director

DATE:

Sept. 25, 2015

SUBJECT:

CONSULTANT CONTRACT

I am submitting the following consultant contract for Board approval:

This professional is needed to provide evaluation services as required by the need of the disability.

Laura H. Hernandez, M.S., M.A. Licensed Specialist in School Psychology Clinical Psychology Pre-Doctoral Student 104 S. Lindenwood Dr. Laredo, Texas 78041 (956) 251-1042

1420 EIDSON ROAD • EAGLE PASS, TEXAS 78852 • 830/773-5181

CONSULTANT CONTRACT

This contract is entered into by and between

Laura H. Hernandez, M.S., M.A., Licensed Specialist in School Psychology

	104 S. Lindenwood Dr., Laredo, Texas 78041 (Name and Address)
	einafter referred to as "Contractor" and the Eagle Pass Independent School District, a Texas political division, hereinafter referred to as "District" on this the $\frac{13th}{}$ day of $\frac{October}{}$, $2\frac{015}{}$.
1.	The purpose of this Agreement is to set out the responsibilities of the parties hereto regarding the professional services to be rendered by contractor to District. District agrees to engage Contractor and Contractor agrees to perform and/or provide the following services: Psychological Evaluations for eligible special education students.
2.	Contractor will perform the services set forth herein in a timely and professional manner and to the District's satisfaction.
3.	In exchange for the Contractor's services, District will pay Contractor a fee of \$\frac{700.00/per student}{2000.000}\$ per day flat fee [circle one]. The total fee is not to exceed \$\frac{50,000.00}{2000.000}\$. Any reimbursement for travel, meals, and lodging or other expenses will be in accordance with District policies and must be accompanied by appropriate receipts. Contractors will not be paid in advance of performing or providing the services. Invoices must be addressed to the Accounts Payable Dept. at the above address. Notwithstanding payment by the District pursuant to an approved invoice, the District reserves the right to audit said Agreement and the services rendered hereunder and to adjust said sun if incorrect or improper. Contractor agrees to refund to District any sums improperly or incorrectly paid Contractor upon notice of same by District. Payment on a properly submitted invoice will be made in accordance with the District disbursement payment schedule.
4.	The contract will be effective on the $\frac{13th}{20th}$ day of $\frac{October}{100th}$, and will expire on the $\frac{30th}{100th}$ day of $\frac{June}{100th}$, unless sooner terminated as provided herein.
5.	This contract may be terminated by the District without cause at any time and Contractor agrees to conclude services upon notification by District that Agreement has been terminated. Either District or Contractor may terminate this contract for convenience after giving the other party thirty (30) days advance written notice. Either District or Contractor may terminate this contract effective immediately for breach of any provision herein provided the non-breaching party gives the breaching party written notice of the breach and thirty (30) days to cure such breach. District may terminate this contract effective at the end of its fiscal year if funds are not appropriated for this contract for the ensuing fiscal year. If this contract is terminated for convenience, District will pay Contractor a prorated share of fees Contractor has earned up to the effective date of termination.
6.	Contractor is not an employee of the District and is not entitled to fringe benefits. Furthermore District will not deduct federal income taxes, FICA or any other funds required to be deducted by an employer as this is the responsibility of the Contractor. Contractor is an independent contractor, and District and Contractor have not entered into a joint venture or partnership in providing the service herein.

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- 7. It is the intention of the parties that the Contractor be an independent Contractor and not an employee of the District under this Agreement and in order to protect the District, Contractor agrees, as consideration herein, to indemnify and hold the District, and its employees, officers and agents, harmless from any and all claims, demands, damages, causes of action, and costs of whatever kind of nature asserted by third parties and occurring or in any way incident to, arising out of, or in connection with any acts of the Contractor its agents, employees, and subcontractors, in the performance of this Agreement, unless such claim, damage injury of losses is the result of the sole negligence of the District.
- 8. In entering into this contract, Contractor agrees to abide by all District policies and regulations. Including, but not limited to, the Contractor agrees to provide the District with sign-in sheets, and evaluation of the service, along with copies of the materials and information used in connection with said service by Contractor, except those provided by District. Accordingly, Contractor agrees to provide such other information and execute other documents as may be required by District policies or regulations. In the conduct of this Agreement, Contractor shall be subject to the Texas State Board of Education rules and all regulations pertaining to this Agreement and the subject matter and to the laws of the State of Texas governing this Agreement, as well as to the Board policies of the District.
- 9. <u>Certification of Criminal History Record Information</u> In accordance with state law and as set forth in the Attachment referenced herein, all required criminal history background checks will be performed prior to the performance of this agreement. Failure to properly complete the certifications or completion of the certification in a manner that is later deemed incomplete or inaccurate that results in the District being in jeopardy of violation of Texas Education Code § 22.085(c) will be good cause for early termination of this agreement at District discretion.
- 10. The District, the Texas Education Agency, the Comptroller General or any of their duly authorized representatives shall have access to any books, documents, or records of the Contractor which are directly related to this Agreement, for the purpose of making audit, examination, excerpts and transcriptions. Additionally, the Contractor shall maintain all required records for five (5) years after the District has made final payments and all other pending matters are closed.
- 11. Contractor may not subcontract or assign this contract or any of its rights hereunder to another person or entity.
- 12. All notices hereunder by either party to the other will be delivered personally or by certified mail, return receipt requested, and will be duly given when delivered personally or three business days after postmarked. If to District, notice will be sent to the Superintendent of Schools at 1420 Eidson Rd., Eagle Pass, Texas 78852. If to Contractor, notice will be sent to the signatory and at the address set forth herein.
- 13. This contract and the following attachments contain the entire agreement between District and Contractor for the services set forth herein and supersedes all prior or contemporaneous agreements, whether oral or written. This contract and its attachments cannot be modified without the advance written consent of each party.

Attachments:	None
Attachments.	

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- 14. In accordance with district policy, there shall be no interruption of instruction during the school day. This contract is not valid unless approved by the EPISD Board of Trustees and/or the Superintendent.
- 15. This contract will be governed by the laws of the State of Texas and is performable in Maverick County, Texas.

IN WITNESS WHEREOF AND EXECUTED, the parties hereto have caused this contract to be executed as of the date and year first above written.

CONTRACTOR:	<u>DISTRICT</u> :	
Laura H. Hernandez, M.S.,M.A.	EAGLE PASS INDEPENDENT SCHOOL DI	STRICT
BY:	BY: DIRECTOR/COORDINATOR/PRINCIPAL	Date
TITLE:	ASST. SUPERINTENDENT/EXECUTIVE DIRECTOR	 Date
	SUPERINTENDENT	DATE
<u> </u>	APPROVED BY EPISD BOARD OF TRUSTEES	
	, 2	

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NON-COLLUSION STATEMENT

"The undersigned affirms that they are duly authorized to execute this contract, that this company, corporation, firm, partnership, or individual has not prepared this bid in collusion with any other Bidder, and that the contents of this bid as to prices, terms, or conditions of said bid/proposal have not been communicated by the undersigned nor by any employee or agent to any other person engaged in this type of business prior to the official opening of this bid."

COMPANY	Laura H. Hernandez, M.S., M.A.
Address	104 S. Lindenwood Dr.
	Laredo, Texas 78041
PHONE AND FAX	(956) 251-1042
CONTRACTOR (SIGNATURE)	
CONTRACTOR (PRINT NAME)	Laura H. Hernandez
POSITION WITH COMPANY	Licensed Specialist in School Psychology
SIGNATURE OF COMPANY	
OFFICIAL AUTHORIZING THIS CONTRACT	
THIS CONTRACT	
COMPANY OFFICIAL (PRINT NAME)	Laura H. Hernandez
OFFICIAL POSITION	Licensed Specialist in School Psychology

1420 EIDSON ROAD - EAGLE PASS, TEXAS 78852 - 830/773-5181

FELONY CONVICTION NOTICE

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 of operator of the business entity has been convicted of a felony. The notice must include a general description of the conduit 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.

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.

COMPANY NAME:		Laura H. Hernandez, M.S., M.A. LSSP
		(PRINT OR TYPE)
AUTH	IORIZED CO	MPANY OFFICIAL'S NAME: Laura H. Hernandez, M.S., M,A. LSSP
Sign only A, B, or C		
A.	My firm is a	publicly held corporation; therefore, this reporting requirement is not applicable.
		SIGNATURE OF COMPANY OFFICIAL
В.	My firm is n	ot owned nor operated by anyone who has been convicted of a felony.
		SIGNATURE OF COMPANY OFFICIAL
C.	My firm is o	wned or operated by the following individual(s) who has/have been convicted of a felony.
	Details of Co	onviction:
		SIGNATURE OF COMPANY OFFICIAL

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DEBARMENT AND SUSPENSION CERTIFICATE CERTIFYING STATEMENT

In accordance with Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510 the contractee certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal Department or Agency.

The Eagle Pass Independent School District hereby agrees to abide by the aforementioned terms and conditions.

COMPANY NAME	Laura H. Hernandez, M.S.,M.A.
Address	104 S. Lindenwood Dr.
	Laredo, Texas 78041
TELEPHONE NUMBER	(956) 251-1042
FAX NUMBER	
COMPANY OFFICIAL (SIGNATURE)	
COMPANY OFFICIAL (PRINT NAME)	Laura H. Hernandez, M.S.,M.A.
POSITION WITH COMPANY	Licensed Specialist in School Psychology

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CONFLICT OF INTEREST QUESTIONNAIRE (FORM CIQ)

FOR VENDOR OR OTHER PERSON DOING BUSINESS WITH LOCAL GOVERNMENTAL ENTITY

This questionnaire is being filed in accordance with chapter 176 of the Local Government Code by a person doing business with the governmental entity. By law this questionnaire must be filed with the records administrator of the local government not later than the 7th business day after the date the person becomes aware of facts that require the statement to be filed. **See Section 176.006, Local Government Code.** A person commits an offense if the person violates **Section 176.006, Local Government Code.** An offense under this section is a Class C misdemeanor.

1. Name of person doing business with local governmental entity.				
(The law requires that you file an upon September 1 of the year for which a	g an update to a previously filed questionnaire. Idated completed questionnaire with the appropriate filing authority not later than In activity described in Section 176.006(a), Local Government Code, is pending Iday after the date the originally filed questionnaire becomes incomplete or inaccurate.)			
3. Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money.				
4. Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire.				
5. Name of local government officer wi (Complete this section only if the answer to A,	ith whom filer has affiliation or business relationship. B, or C is YES.)			
This section, item 5 including subparts A, B, C & business relationship. Attach additional pages to	D, must be completed for each officer with whom the filer has affiliation or this Form CIQ as necessary.			
A. Is the local government officer named in	this section receiving or likely to receive taxable income from the filer of the questionnaire?			
	Yes No			
	or likely to receive taxable income from or at the direction of the local government officer ne is not from the local governmental entity?			
	YES NO			
C. Is the filer of this questionnaire affiliated officer or director, or holds an ownership of	with a corporation or other business entity that the local government officer serves as an ten percent (10%) or more?			
	YES NO			
D. Describe each affiliation or business relat	ionship.			
6. Describe any other affiliation or bus	iness relationship that might cause a conflict of interest.			
7.				
SIGNATURE OF PERSON DOING BUSINESS WIT	TH THE GOVERNMENTAL ENTITY DATE			

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CERTIFICATION OF CRIMINAL HISTORY RECORD INFORMATION

Each Texas public school district must receive certification from any entity with which it contracts to provide services regarding the fact that the entity has obtained the following for all employees who have or will have "continuing duties related to contracted services;" and have "direct contact with students" before employing or immediately after employing or securing the services of the individual:

- (1) A name-based criminal history background check on all employees hired before January 1, 2008;
- (2) A national criminal history record information review on all employees hired on or after January 1, 2008, which may include fingerprints and photographs.

"Continuing duties related to contracted services" – work duties that are performed pursuant to a contract to provide services to a school district on a regular, repeated basis rather than infrequently or one time only.

"Direct contact with students" – The contact that results from activities that provide substantial opportunity for verbal or physical interaction with students that is not supervised by a certified educator or other professional district employee. Contact with students that results from services that do not provide the opportunity for unsupervised interaction with an individual student, such as addressing an assembly, officiating a sports contest, or judging an extracurricular event, is not, by itself, direct contact with students. However, direct contact with students does result from any activity that provides the opportunity for unsupervised contact with students such as, without limitation, the provision of individualized coaching, tutoring, or other services. 19 TAC § 153.1101

The required criminal history record information can be obtained from either of the following:

- A law enforcement or criminal justice agency
- A private entity that is a consumer reporting agency governed by the
- Fair Credit Reporting Act (15 U.S.C. Section 1681 et seq.)

The school district may not allow any employee of the entity or an individual to serve at the district if information obtained through this review verifies that the employee has been convicted of one of the following and at the time of the offense the victim was under 18 years of age or was enrolled in a public school:

- (1) A Title 5 felony offense;
- (2) An offense requiring the individual to register as a sex offender; or
- (3) An offense under the laws of another state or federal law that is equivalent to a Title 5 felony in the state of Texas or that would require registration in the Texas sex offender databank.

Name of Contracting Entity or Individual:		. Hernandez, M.S., M.A., Licensed Specialist in School Psychology		
Type of service to be performed on school of	ampus:	Psychological Evaluations for eligible special education		
		students.		

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On behalf of the above-named contracting entity or individual, I hereby certify the following (Check One):

Change	UDE OF PEDSON DOING RUSINESS WITH THE GOVERNMENTAL FATTIV	DATE
contra history will m emplo has be schoo the di	e attached a list of employees, including myself, who have or will have content and who will have direct contact with students. None of these individual render the employee ineligible for service at a Texas public so take available for the District's inspection the criminal history record yee. I will notify the District within three business days if I receive information convicted of a criminal offense that would render the individual ineligible district under state law. I agree that if the district objects to the assignment, or my contract with the District may be terminated.	duals has a reported criminal chool district. Upon request, I information of any covered ation that a covered employee le for service at a Texas publicment of a covered employee to
backg which	All employees, including myself, who have continuing duties related to to District and who also have direct contact with students have undergone round check (employed before January 1, 2008) or national criminal history may include fingerprints and photographs (employed on or after January 1 and contact as described herein was revealed.	e the required criminal history ory record information review,
	No employees, including myself, have continuing duties related to the contract with students; therefore, I/we do not have any covered cound check is required.	

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FOR DEPARMENT OF PURCHASING USE ONLY

CONSULTANT CONTRACT CHECKLIST					
1. CONSULTANT CONTRACT	-	YES NO			
2. ATTACHMENTS TO CONSULTANT CONTRAC	TS (RÉSUME; TAX FORMS; ETC.)	-	YES NO		
3. NON-COLLUSION STATEMENT		<u>-</u>	YES NO		
4. FELONY CONVICTION NOTICE		· · · · · · · · · · · · · · · · · · ·	YES NO		
5. DEBARMENT AND SUSPENSION CERTIFICAT	TE CERTIFYING STATEMENT	-	YES NO		
6. CONFLICT OF INTEREST QUESTIONNAIRE	_	YES NO			
7. CERTIFICATION OF CRIMINAL HISTORY RE	_	YES NO			
8. CONSULTANT CONTRACT DISCLOSURE FOR	-	YES NO			
9. APPROVAL BY EPISD BOARD OF TRUSTEES			YES NO		
10. PURCHASE ORDER(S) NO	·		·		
Received By:	Purchasing Director	DATE			
	. Side Barrellon				

EAGLE PASS INDEPENDENT SCHOOL DISTRICT CONSULTANT CONTRACT DISCLOSURE FORM

(TO BE COMPLETED BY REQUESTOR) 1. Name and Title of Requestor	Delia Gonzalez, Special Ed. Director			
2. Name of Campus/Department	Austin Center/Special Education Department			
• • •	ng Contracted (Contact Name, Address, City, State, Phone Number) in School Psychology, 104 S. Lindenwood Dr., Laredo, Texas 78041			
4. Total Requested Contract Amount	\$ 50,000.00			
5. What is the funding source for this cont	ract (Federal, State, and/or Local Budgeted Funds).			
<u>168/224</u> _ <u>11</u> _ <u>6217</u>	00 _ 825 _ 623			
6. Have there been any additional contract year? If yes, please list?	t(s) with this company, firm, or vendor during this fiscal			
7. Will there be any additional contract(s) year? If yes, please list?	with this company, firm, or vendor during this fiscal			
NO				
8. What other Company, Firm, or Vendor v services?	was/were considered to provide these contracted			
Education Service Center, Region 20 and Related Services Co-op members.				
•	ecting the recommended contractor? Please list? needs 4. Dependability 5. Specialist in identifying students with			
emotional & behavior problems.				
10. Does this contracted service support the District Improvement Plan? If yes, please explain and attach pertinent section of DIP Plan. Yes, to ensure identification and implementation of services for students of the EPISD receiving special education services.				

EAGLE PASS INDEPENDENT SCHOOL DISTRICT CONSULTANT CONTRACT DISCLOSURE FORM

11. Does this contracted service support your Campus Improvement Plan? If yes, please explain and attach pertinent section of CIP Plan. Yes, to ensure identification and implementation of services for students of the EPISD receiving special education					
Yes, to ensure identification and imple	mentation of serv	vices for students of the EPISD receiving special education			
services.					
12. Please summarize the purpos benefit from this contracted serv Special Education Program		acted service and what specific program(s) will			
13. Does this Company, Firm, or Vendor meet the requirements under Senate Bill 9 having obtained state and national criminal history background searches on their employees? Yes					
	APPROV	VAL			
		Delia Gonzalez			
SIGNATURE OF REQUESTOR	DATE	Name of Requestor			
SIGNATURE OF DIRECTOR/COORDINATOR	DATE	Delia Gonzalez, Special Education Director Name and Title of Director and Coordinator			
SIGNATURE OF BIRECTORY COOKSINATOR	DAIL .	TOTALE AND TITLE OF BALEFOR AND GOOD ON TOTAL			
		Samuel Mijares, Deputy Superintendent for C & I			
SIGNATURE OF ASST. SUPT./EXEC. DIRECTOR	DATE	Name and Title of Asst. Supt./Exec. Director			
FOR DEPARTMENT OF PURCHASING USE ONLY					

EAGLE PASS I.S.D. - NOTICE OF GRANT AWARD RECEIPT AFFIDAVIT (FOR CONTRACTS USING FEDERAL FUNDING)

Vendor hereby acknowledges and accepts that any contracts or agreements using federal funds entered into by vendor and the Eagle Pass Independent School District (EPISD) shall be contingent on, and be executed after, receipt of Notice of Grant Award (NOGA). The contracting period for this contract or agreement shall be aligned to the grant period of availability as stated on the NOGA received by EPISD. Services shall be completed during the effective dates of the contract and invoiced to EPISD after the services are performed by vendor and verified by EPISD. If the NOGA is not received by EPISD to fund the contract or agreement, the contract or agreement between the vendor and EPISD shall become null and void.

Laura H. Hernandez, M.S., M.A.		
Company Name		
Laura H. Hernandez, M.S., M.A.		
Printed name of authorized company representative		
Licensed Specialist in School Psychology		
Title of authorized company representative		
Signature and date of authorized company representative		

TEXAS STATE BOARD OF EXAMINERS OF PSYCHOLOGISTS

SA MANTENETERINAN SA MANTENETERINAN SA MANTENETERINAN SA MANTENETERINAN SA MANTENETERINAN SA MANTENETERINAN SA Maria

ANNUAL RENEWAL PERMIT

Licensed Specialist in School Psychology

THIS DOCUMENT
IS DULY ISSUED
UNDER THE LAWS
OF THE

STATE OF TEXAS

LAURA H HERNANDEZ M.A. 104 S LINDENWOOD DR LAREDO, TX 78041



33214

November 30, 2015

LICENSE NO.

EXPIRATION DATE

MUST BE DISPLAYED WITH LICENSE IN A CONSPICUOUS PLACE



t Blak Management Sandage Inc. doing hydroge in TY as Potom

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY) 08/17/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

CONTACT
NAME: Trust Risk Management Services, Inc.

Risk Management Services, Inc.			55 55 T BIONNO	EMAIL (MC, NO): 877.251.5111			
1791 Paysphere Circle				ADDRESS: Info@trustrms.com INSURER(S) AFFORDING COVERAGE			
Chicago, IL 60874				INSURER(S) AFFORDING COVERAGE INSURER A: ACE American Insurance Company			NAIC # 22667
INSURED	***************************************		· · · · · · · · · · · · · · · · · · ·	INSURER B:			
Laura Hernandez				INSURER C:			i i
104 S Lindenwood Dr				INSURER D:			
Laredo, TX 78041 2802				INSURER E:			
				INSURER F:			
COVERAGES CE	RTIFIC	CATE	NUMBER:		REV	SION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.							
INSR LTR TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (NIWDD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	3
CLAIMS MADE OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence	8
						MED EXP (Any one person	
GENL AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJUR	s s
						PRODUCTS-COMPAOP A	5
POLICY PRO- JECT LOC						PRODUCTS-COMPION	<u></u>
AUTOMOBILE LIABILITY						COMBINED SINGLE LIMI (Ea accident)	r s
AMY AUTO						BODILY INJURY (Per Per	ion) \$
ALL OWNED SCHEDULED AUTOS AUTOS						BODILY INJURY (Per acci	dent \$
HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	S
	╄	<u> </u>					\$
UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE						EACH OCCURRENCE	5
	┨					AGGREGATE	5
DED RETENTION S WORKERS COMPENSATION	╁						OTH- s
AND EMPLOYERS LIABILITY Y/N						1.7	S S
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L.EACH ACCIDENT E.L. DISEASE-EA EMPLO	
(Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY L	
Psychologist's Professional Liability Retroactive Date: 08/01/2015			58G26196310	08/01/2015	08/01/2016		51,000,000 53,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required):							
CERTIFICATE HOLDER				CANCELLATION	1		
BE			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				AUTHORIZED REPRESENTATIVE			

ACORD 25 (2014/01)

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Laura H. Hernandez, M.S., M.A. 104 S. Lindenwood Dr. Laredo, Texas 78041

VITA

EDUCATION

1980	Associate of Arts Laredo Junior College
1984	Bachelor of Science Laredo State University Presently Texas A&M International Major: Elementary Education Minor: Mathematics
1995	Master of Science Laredo State University Major: Education Minor: Psychology
2004	Master of Arts University of Texas – Pan American Major: School Psychology
2008	Walden University Presently Pursuing Ph D Major: Psychology Concentration: Clinical Psychology
2013	Practicum I & II (Dr. Clarissa Kuhns, Supervisor) Webb County Juvenile Department Esperanza Youth Recovery Home
2014-2015	Internship Lone Star Psychology Internship Consortium Dr. Cynthia C. Gonzalez, Supervisor Dr. Joseph McCoy, Supervisor

Rotations:

Pinkerman & Gonzalez Psychological Associates (Assist with supervision & training of Psychology

Doctoral Practicum Student)

Evins Regional Juvenile Center (TJJD)

University of Texas -Pan American Counseling Center

(CAPS)

La Clinical Del Valle (Community Clinic)

CERTIFICATION

1984	Mathematics
1984	Self-Contained
1985	Bilingual ESL
1991	Generic Special Education
1995	Counselor
1999	Special Education Counselor
1999	Educational Diagnostician
2006	Regular Education Supervisor
2006	Special Education Supervisor

LICENSURE

Texas State Board of Examiners of Psychologists

2006 Licensed Specialist in School Psychology

License No. 33214

EXPERIENCE

2011 -2011 Roma Independent School District

Licensed Specialist in School Psychology

(Contract)

2008-2009 Zapata County Juvenile Department

Licensed Specialist in School Psychology

(Contract)

2007–06/2011 Laredo Independent School District

Licensed Specialist in School Psychology

2006 – PRESENT Webb County Juvenile Alternative Ed Program

Licensed Specialist in School Psychology

(Contract)

2006-2007 Webb County Head Start

Licensed Specialist in School Psychology

(Contract)

1996 –2007 Educational Diagnostician

Laredo Independent School District

1988-1996 Special Education Teacher

1984-1988 Regular Education Teacher

Professional Associations

2004-PRESENT National Association of School Psychologists

2004-PRESENT Texas Association of School Psychologists

2009-PRESENT American Psychological Association

2014-PRESENT Texas Psychological Association

National Presentations:

Gomez, L.H., Mitchell, J., Carlson, R. (May 24-27, 2007). Relationship Between ADHD Comorbidities and Individuals with Disabilities Education Act Eligibility in Mexican American Children. The 19th Annual Convention of the Association for Psychological Science, Washington, D.C.