

## **Exhibits Marked for Deletion**

Keller ISD  
220907

EMPLOYMENT REQUIREMENTS AND RESTRICTIONS:  
CONFLICT OF INTEREST

DBD  
(EXHIBIT)

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See the following pages for forms to be used by employees for disclosing potential conflicts of interest:

Exhibit A: Affidavit Disclosing Substantial Interest in a Business Entity or in Real Property, as defined in Local Government Code 171.002 - 2 pages

Exhibit B: Affidavit Disclosing Interest in Property, under Government Code Chapter 553, Subchapter A - 2 pages

Exhibit C: District Employee Affidavit Affirming Review of Conflict of Interest Policies, Regulations, and Procedures-1 page

ADDITIONAL DISCLOSURE: The Superintendent and any other employees identified by Board policy as being required to file the conflicts disclosure statement, in accordance with Local Government Code 176.003-.004, may access that form on the Texas Ethics Commission Web site at <http://www.ethics.state.tx.us>.

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**EXHIBIT A**

**AFFIDAVIT DISCLOSING SUBSTANTIAL INTEREST**

**IN A BUSINESS ENTITY OR IN REAL PROPERTY**

STATE OF TEXAS

COUNTY OF Tarrant

I, \_\_\_\_\_(name), as an employee of Keller ISD, make this affidavit and hereby on oath state the following: I have a substantial interest in:

a business entity, as those terms are defined in Local Government Code Sections 171.001-171.002, that would experience a special economic effect distinguishable from its effect on the public by an action of the Board or the District. [See BBFA]

or

real property for which it is reasonably foreseeable that an action of the Board or District will have a special economic effect on the value of the property distinguishable from its effect on the public.

The business entity or real property is (name/address of business or description of property):

\_\_\_\_\_.

I \_\_\_\_\_ have a substantial interest in this business entity or real property as follows: (check all that apply)

Ownership of ten percent or more of the voting stock or shares of the business entity.

Ownership of ten percent or more of the fair market value of the business entity.

Ownership of \$15,000 or more of the fair market value of the business entity.

Funds received from the business entity exceed ten percent of my gross income for the previous year.

[ ] Real property is involved and I have an equitable or legal ownership with a fair market value of at least \$2,500.

The statements contained herein are based on my personal knowledge and are true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

Signature of employee \_\_\_\_\_

Title \_\_\_\_\_

ACKNOWLEDGEMENT

STATE OF TEXAS

COUNTY OF Tarrant

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

\_\_\_\_\_, Notary Public in and for the State of Texas

NOTE: This affidavit should be filed with the Superintendent, Board President, or a designee before the Board takes action concerning the business entity or real property.

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**EXHIBIT B**

**AFFIDAVIT DISCLOSING INTEREST IN PROPERTY**

STATE OF TEXAS

COUNTY OF Tarrant

I, \_\_\_\_\_ (name), as Superintendent of Keller ISD, make this affidavit and hereby on oath state the following:

I have a legal or equitable interest in property to be acquired with public funds, either by purchase or condemnation.

The property is described as follows:

\_\_\_\_\_.

The nature, type, and amount of interest, including but not limited to percentage of ownership, I have in the property is:

\_\_\_\_\_.

The interest was acquired on \_\_\_\_\_ (date).

I swear that the information in this affidavit is personally known by me to be correct and contains the information required by Section 553.002, Government Code.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

Signature of Superintendent \_\_\_\_\_

**ACKNOWLEDGEMENT**

STATE OF TEXAS

COUNTY OF Tarrant

BEFORE ME, \_\_\_\_\_ (here insert the name and character of the officer administering the oath) on this day personally appeared \_\_\_\_\_ (affiant) known to me (or proved to me on the oath of \_\_\_\_\_ or through \_\_\_\_\_ [description of identity card or other document]) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

\_\_\_\_\_, Notary Public in and for the State of Texas

NOTE: This affidavit should be filed with the county clerk(s) within ten days before the date on which the property is to be acquired, as provided by Government Code 553.002.

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**EXHIBIT C**

**KELLER ISD EMPLOYEE AFFIDAVIT**

**REVIEW OF CONFLICTS OF INTEREST POLICIES, REGULATIONS AND PROCEDURES**

As an employee of the Keller Independent School District, I hereby state and affirm that I have reviewed Board policies, District regulations, and operating procedures related to potential conflicts of interest, including without limitation, Board policies DBD(LEGAL), (LOCAL), and (EXHIBIT). I further state and affirm that I will comply with such policies, regulations, and procedures at all times during my employment with the District.

Employee signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Keller Independent School District

State of Texas

County of Tarrant

Before me, a Notary Public, personally appeared \_\_\_\_\_,  
known to me to be the person whose name is subscribed to the foregoing document,  
and, being by me first duly sworn, declared that the statements contained therein  
are true and correct.

[ SEAL ]

Notary Public \_\_\_\_\_

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DATE ISSUED: 11/29/2005  
UPDATE 77  
DBD(EXHIBIT)-X

This chart summarizes the vaccine requirements incorporated in Title 25, Health Services, Section 97.61-97.72 of the Texas Administrative Code. This chart is not intended as a substitute for consulting the Texas Administrative Code, which has other provisions and details.

KINDERGARTEN THROUGH GRADE 12 (K-12)

Vaccine	Required Doses(1)
Diphtheria, Tetanus Toxoid, and Pertussis Vaccine (DTP), DTaP, DT, Td)	Five doses of any combination DTaP/DTP unless fourth dose was given on or after fourth birthday.
	Students 7 years or older:
	Three doses of any combination DTP/DTaP/DT/Td vaccine (Pertussis vaccine is not required.)
	One dose of Td required ten years after last dose of DTP/DTaP/DT
Polio (IPV)	Four doses unless the third dose was on or after fourth birthday.
Measles, Mumps, Rubella (MMR)(2)	Two doses of a measles-containing vaccine with the first dose on or after the first birthday; second dose by age 5 or entry into kindergarten.
Hepatitis B(2, 3)	Three doses are required for the following grades in the following school years:
	2004-05 K-5 and 7-10
	2005-06 K-11
	2006-07 K-12
Varicella(2, 4)	One dose on or after first birthday for the following grades:
	2004-05 K-4 and 7-10
	2005-06 K-5 and 7-11
	2006-07 K-12
	(Two doses if vaccine given at 13 years of age or older.)
Hepatitis A(2, 5)	Two doses on or after second birthday(5) for kindergarten-grade 3 only.



NOTE:

(1) Receipt of the dose up to (and including) 4 days before the birthday will satisfy the school entry immunization requirement.

(2) Serologic confirmation of immunity to measles, mumps, rubella, hepatitis B, hepatitis A, or varicella or serologic evidence of infection is acceptable in lieu of vaccine.

(3) Two doses of adult hepatitis B vaccine (RecombivaxR) are acceptable. Dosage and type of vaccine must be clearly documented. (Two 10 mcg/1.0 ml of RecombivaxR)

(4) Serologic proof of immunity or documentation of previous illness may substitute for vaccination. Previous illness may be documented with a written statement from a physician, school nurse, or the child's parent or guardian containing wording such as: "This is to verify that (name of student) had varicella disease (chickenpox) on or about (date) and does not need varicella vaccine."

(5) Hepatitis A vaccine is required for students attending a school located in a high incidence geographic area designated by the Texas Department of State Health Services. Thirty-nine counties affected by the hepatitis A requirement are: Bexar, Brewster, Brooks, Cameron, Crockett, Culberson, Dimmitt, Duval, Edwards, El Paso, Frio, Grayson, Hidalgo, Hudspeth, Jeff Davis, Jim Hogg, Kenedy, Kinney, La Salle, Maverick, McMullen, Moore, Nueces, Pecos, Potter, Presidio, Randall, Read, Reeves, Starr, Sutton, Terrell, Terry, Uvalde, Val Verde, Webb, Willacy, Zapata, and Zavala.

Exemptions: The law allows (A) physicians to write a statement stating that the vaccine(s) required would be medically harmful or injurious to the health and well-being of the child, and (B) parents or guardians to choose an exemption from immunization requirements for reasons of conscience, including a religious belief. The law does not allow parents or guardians to elect an exemption simply because of inconvenience.

For children needing medical exemptions, a written statement by the physician should be submitted to the school.

Instructions for the affidavit to be signed by parents or guardians choosing the exemption for reasons of conscience, including a religious belief, can be found at

[HTTP://WWW.IMMUNIZETEXAS.COM.](http://www.immunizetexas.com)

Schools should maintain an up-to-date list of students with exemptions, so they can be excluded from attending school if an outbreak occurs.