



## Austin Independent School District HUB Program Compliance Checklist

Solicitation Number & Name: 21CSP051 RENOVATIONS AT PICKLE ES

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

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



*A printed HUB Certificate DOES NOT affirm ACTIVE certification*


\* Verify ACTIVE certification for subcontractor at either links to count as participation:

State of Texas HUB \_\_\_\_\_

or

City of Austin MBE/WBE  
\_\_\_\_\_

Were the stated solicitation goal(s) met in your submitted proposal? YES  NO

If the question above is answered YES,  \_\_\_\_\_

If NO, please complete this Compliance Check List on the reverse side.

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