

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