



490 N State Street, Lindon, UT, 84042 phone (385) 579-5000

SCHEDULE 'A' - CERTIFICATION OF PROPOSAL FORM

I have read the Timpanogos School District Request for Statements of Qualifications, RFSQ, and fully understand the intent. I certify that I have adequate personnel and resources to fulfill the RFSQ requirements. I further understand that my ability to meet the criteria and provide the required services shall be judged solely by The District.

I further certify that, since the receipt of this RFSQ, no contact, discussion, or negotiations have been made nor will be made regarding this proposal with any District contact. I understand that any such contact could disqualify this RFSQ.

I further certify that I am properly licensed to conduct business within the scope of this RFSQ, in the State of Utah.

I certify that all Schedules contained herein shall be considered part of the entire RFSQ response and that the complete RFSQ document submitted shall be considered a legally binding document.

Company Name

Authorized Signature

Printed Name and Title

Phone

Email

Date