



Learn. Lead. Leave a Legacy!

**Memphis Shelby County Schools
Armed and Unarmed Guard Services
Vendor Assessment Questionnaire**

Company Name: _____ Company Website: _____
Responder Name: _____ Date of Response: _____

Each bidder must answer each of the following questions: Attach statement any qualifying conditions.

Armed Guard Services Various Locations

1. Are your guards bonded? _____ **(If yes, supply copy of bond)**
2. Does your firm have liability insurance to cover actions of the guards?
_____ **(If yes, supply a copy of the insurance certificate)**
3. Does your company carry workman's compensation insurance?
_____ **(If yes, supply a cost of certification upon request)**
4. Can you submit three references for whom you have performed similar services? _____ **(If yes, See Appendix C, Testimonials must be submitted with references)**
5. Are you licensed by the State of Tennessee and registered with the Shelby County Sheriff's Department as specified in TCA 62-35-101? _____
Officers must meet the requirements of 62-35-118. **(If yes, state type of license and supply a copy)** _____
6. After notification from MSCS Safety & Security will your company be able to provide a guard/officer within four (4) hours? _____
7. Since the schedule can change at a moment's notice, what is the minimum number of hours required for your personnel of guards/officers to report to duty? _____
8. Does your company have a minimum of thirty (30) officers/guard employed? **(Yes or No)**. How many officers/guards Total? _____
9. Can your company supply a minimum of four (4) guards per shift? **(Yes or No)**
10. Approximately how many of the 30 guards required on any given night could you supply? _____
11. MSCS Safety & Security will set all schedules. However, please be aware that the schedule can change at any time.
12. This bid is non-exclusive. Therefore, Memphis Shelby County Schools reserves the right to contract with any or all of the respondents that agree to the terms of this bid.
13. Your company must be willing to be placed on a rotation basis.
14. Must provide a designated point of contact person or persons to return calls within thirty (30) minutes of notification by phone. Email/text messaging cannot be a form of notification? Please list all contacts

Unarmed Guard Services Various Locations

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_____ (If yes, supply a copy of the insurance certificate)
3. Does your company carry workman's compensation insurance?
_____ (If yes, supply a copy of certification upon request)
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