

The designated representative for the LEA for this DPA is:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The designated representative for the Provider for this DPA is:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**IN WITNESS WHEREOF**, LEA and Provider execute this DPA as of the Effective Date.

LEA:XXXXXXXXXXXXXXXXXXXXX New Trier Township HS District 203

By: Michael Marassa Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

By: Sy Stone  
Printed Name: Sy Stone

Date: 2021-08-20  
Title: Superintendent

SCHOOL DISTRICT NAME: Crab Orchard CUSD 3

DESIGNATED REPRESENTATIVE OF LEA:

Name: Sy Stone

Title: Superintendent

Address:

Phone: 6189822181

Email: sy.stone@cocusd3.com