

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: Kai Killam

Date: 2021-08-01

Printed Name: Kai Killam

Title: Asst Principal

SCHOOL DISTRICT NAME: United Twp HSD 30

DESIGNATED REPRESENTATIVE OF LEA:

Name: Kai Killam

Title: Asst Principal

Address:

Phone: 3097521605

Email: kkillam@uths.net