EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

Provider offers the same privacy protections found in	this DPA hetween it	and Haverhill Public Schools			
("Originating LEA") which is dated 1-10-2022					
General Offer of Privacy Terms ("General Offer") through it	ts signature below. This	General Offer shall extend only			
to privacy protections, and Provider's signature shall not r	_				
term, or schedule of services, or to any other provision not a					
LEA may also agree to change the data provided by Subsc					
the Subscribing LEA. The Provider may withdraw the General Offer in the event of: (1) a material change in the applicable privacy statutes; (2) a material change in the services and products listed in the originating Service Agreement; or three (3) years after the date of Provider's signature to this Form.					
			Subscribing LEAs should send the signed Exhibit "E" to Pro	vider at the following ϵ	email address:
			contract.services@act.org	·	
ACT, Inc. —DocuSigned by:					
ACT, Inc. Docusigned by: Julie Murphy	Date:	1/10/2022			
A75D2F157769499	batc				
Printed Name: Julie Murphy	Title/Position:	Vice President			
Triffica Name:	11116/1 031110111.	Vice i resident			
2. Subscribing LEA					
A Subscribing LEA, by signing a separate Service Agreemen	t with Provider, and by	its signature below, accepts the			
General Offer of Privacy Terms. The Subscribing LEA and th	e Provider shall therefor	ore be bound by the same terms			
of this DPA for the term of the DPA between the Haver	hill Public Schools and	d the Provider. **PRIOR TO ITS			
EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE	OF ACCEPTANCE TO PR	ROVIDER PURSUANT TO ARTICLE			
VII, SECTION 5. **					

By: <u>Dave Brisson</u> Date: 2022-09-22

Printed Name: <u>Dave Brisson</u> Title/Position: <u>Director of Information Technology</u>

SCHOOL DISTRICT NAME: Grand Isle Supervisory Union

Subscribing LEA: (School District Name):

DESIGNATED REPRESENTATIVE OF LEA

Name: Dave Brisson

Title: <u>Director of Information Technology</u>

Address: PO Box 54, Grand Isle, VT 05458 Grand Isle, VT

Telephone Number: 802-372-2280

Email: Dbrisson@gisu.org

COUNTY OF LEA: Grand Isle