Standard Student Data Privacy Agreement

IL-NDPA v1.0a

School District or LEA

and

Provider

By: <u>Donna Wall</u> Printed Name: <u>Donna Wall</u> Date: <u>2022-08-01</u> Title: <u>Director of Technology</u>

SCHOOL DISTRICT NAME: <u>Lemont High School</u> DESIGNATED REPRESENTATIVE OF LEA: Name: <u>Donna Wall</u> Title: <u>Director of Technology</u> Address: <u>800 Porter St</u> Phone: <u>6302433288</u> Email: <u>dwall@lhs210.net</u>