EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

| 1. | Offer | of | Terms |
|----|-------|----|--------------|
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| Provider offers the same privacy protections | found in this DPA between it a | and Maine School Administrative | | | |
|--|------------------------------------|---------------------------------------|--|--|--|
| District #6 ("Originating LEA") which is dated | | other LEA ("Subscribing LEA") who | | | |
| accepts this General Offer of Privacy Terms ("G | General Offer") through its signat | ure below. This General Offer shall | | | |
| extend only to privacy protections, and Provi | der's signature shall not necessa | arily bind Provider to other terms, | | | |
| such as price, term, or schedule of services, or | to any other provision not addre | essed in this DPA. The Provider and | | | |
| the Subscribing LEA may also agree to change | e the data provided by Subscrib | ing LEA to the Provider to suit the | | | |
| unique needs of 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 ar | nd products listed in the originating | | | |
| Service Agreement; or three (3) years after the | e date of Provider's signature to | this Form. | | | |
| Subscribing LEAs should send the signed sales@brainingcamp.com | d <u>Exhibit "E"</u> to Provider a | t the following email address: | | | |
| Brainingcamp, LLC BY: | | | | | |
| BY: Www. | Date | : 03/02/2023 | | | |
| Printed Name: | Title/Position: | | | | |
| 2. Subscribing LEA | | | | | |

A Subscribing LEA, by signing a separate Service Agreement with Provider, and by its signature below, accepts the General Offer of Privacy Terms. The Subscribing LEA and the Provider shall therefore be bound by the same terms of this DPA for the term of the DPA between the Maine School Administrative District #6 and the Provider. **PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. **

By: Trisha Leary Date: 2023-06-05

Printed Name: Trisha Leary Title: District Instructional Technology Specialist

SCHOOL DISTRICT NAME: Dartmouth Public Schools

DESIGNATED REPRESENTATIVE OF LEA:

Name: Jonathan Gallishaw Title: CTO

Address: 8 Bush Street Phone: 5089973391

Email: jonathangallishaw@dartmouthschools.org