

**EXHIBIT "E"**

**GENERAL OFFER OF PRIVACY TERMS**

**1. Offer of Terms**

Provider offers the same privacy protections found in this DPA between it and **Upper Arlington City Schools** ("Originating LEA") which is dated 06/28/2024 , to any other LEA ("Subscribing LEA") who accepts this General Offer of Privacy Terms ("General Offer") through its signature below. This General Offer shall extend only to privacy protections, and Provider's signature shall not necessarily bind Provider to other terms, such as price, term, or schedule of services, or to any other provision not addressed in this DPA. The Provider and the Subscribing LEA may also agree to change the data provided by Subscribing 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 changes in the applicable privacy statues; (2) a material changes 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 Provider at the following email address: privacy@slptoolkit.com.

Name of Provider:

BY: SLP Toolkit, LLC Date: 9/2/2022  
Printed Name: Paul Keck Title/Position: Privacy Officer

**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 originating LEA: \_\_\_\_\_ and the Provider. **\*\*PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. \*\***

Name of Subscribing LEA:

By: Jenna McDevitt Date: 2024-10-31  
Printed Name: Jenna McDevitt Title: Director - Business Management and Facilities

SCHOOL DISTRICT NAME: Olentangy Local School District  
DESIGNATED REPRESENTATIVE OF LEA:  
Name: Sam Marshall  
Title: IT Security Supervisor  
Address: 7840 Graphics Way, Lewis Center, Ohio, 43035  
Phone: 7406575081  
Email: Samuel\_Marshall@olsd.us