

EXHIBIT "E"
GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

Provider offers the same privacy protections found in this DPA between it and **Haverhill Public Schools** ("Originating LEA") which is dated 1-10-2022, 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 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 Provider at the following email address: contract.services@act.org.

ACT, Inc.

DocuSigned by:
Julie Murphy
A75D2F157769499...

BY: _____ Date: 1/10/2022

Printed Name: Julie Murphy Title/Position: Vice President

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 **Haverhill Public Schools** and the Provider. ****PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. ****

Subscribing LEA: (School District Name): _____

By: Bonnie Birdsall Date: 2022-11-02

Printed Name: Bonnie Birdsall Title/Position: _____

SCHOOL DISTRICT NAME: Champlain Valley School District

DESIGNATED REPRESENTATIVE OF LEA

Name: Bonnie Birdsall

Title: _____

Address: 5420 Shelburne Rd, Shelburne, VT 05482 Shelburne, VT

Telephone Number: _____

Email: bbirdsall@cvsdvt.org

COUNTY OF LEA: Chittenden