


**EXHIBIT "E"**  
**GENERAL OFFER OF PRIVACY TERMS**

**1. Offer of Terms**

Provider offers the same privacy protections found in this DPA between it and Troy CCSD 30c ("Originating LEA") which is dated \_\_\_\_\_, 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: contracts@renaissance.com.

**PROVIDER:** Renaissance Learning, Inc.

BY:  Date: 05/16/2024

Printed Name: Scott Johnson Title/Position: Director, Security Ops & Compliance

**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 Troy CCSD 30c and Renaissance Learning, Inc.

**\*\*PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. \*\***

-----

By: Peter Komitas Date: 2024-11-18  
Printed Name: Peter Komitas Title: Director of Technology

SCHOOL DISTRICT NAME: Indian Creek School District  
DESIGNATED REPRESENTATIVE OF LEA:  
Name: Peter Komitas  
Title: Director of Technology  
Address: 506 S. Shabbona Rd  
Phone: 815-264-3351  
Email: peter.komitas@ictwolves.com