## <u>EXHIBIT "E"</u> GENERAL OFFER OF PRIVACY TERMS

## 1. Offer of Terms

| Provider offers the same privacy protections found  | I in this DPA between it and                          |           |
|---|---|-----------|
| ("Originating LEA") which is dated , to   | any other LEA ("Subscribing LEA") who accepts this    | Genera    |
| 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 |   |           |
|   |   |           |
| Subscribing LEA may also agree to change the d  | ata provided by Subscribing LEA to the Provider to    | suit the  |
| unique needs of the Subscribing LEA. The Provi  | der may withdraw the General Offer in the event       | of: (1) a |
| material change in the applicable privacy statues;  | (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 the   | his Form  |
| Subscribing LEAs should   | send the signed <b>Exhibit</b>                        | "Е        |
| to Provider at the following email address:   | eolsen@dotcomtherapy.com                              |           |
|   |   |           |
| PROVIDENSigned by: DotCom Therapy   | 0 /2 /2022  |           |
| BY: Emily Olsen   | 9/2/2022<br>Date:                                     |           |
| 4F4ZZAUZSAB94FZ   |   |           |
| Printed Name:   | Chief Experience OfficerTitle/Position:               |           |
| 2. Subscribing LEA  |   |           |
| A Subscribing LEA, by signing a separate Service Ag   | reement with Provider, and by its signature below, ac | cepts     |
| the General Offer of Privacy Terms. The Subscribin  | g LEA and the Provider shall therefore be bound by th | e same    |
| terms of this DPA for the term of the DPA between   | the   |           |
| and DotCom Therapy  |   |           |
| **PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LE  | A MUST DELIVER NOTICE OF ACCEPTANCE TO PROV           | √IDER     |
| PURSUANT TO ARTICLE VII, SECTION 5. **  |   |           |
| — DosuSigned by:  |   |           |
|   |   |           |
| By: <u>Nadine Norris</u>  | Date: <u>2024-01-05</u>                               |           |
| Printed Name: Nadine Norris   | Title: Director of Technology, Teaching and L         | _earning  |

SCHOOL DISTRICT NAME: <u>CUSD 201</u>
DESIGNATED REPRESENTATIVE OF LEA:

Name: Nadine Norris

Title: Director of Technology, Teaching and Learning

Address: 133 South Grant Street

Phone: <u>630-468-8014</u>

Email: nnorris@cusd201.org