EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

Provider offers	the same privacy pro	tections found in th	is DPA between	it and Na	shua Schoo	I District	Ċ
("Originating LE	A") which is dated _	1/16/2024	_, to any other l	EA ("Sub	scribing LEA	۹") who	accepts
this General Offe	er of Privacy Terms ("G	General Offer") thro	ugh its signature b	elow. Th	is General O	ffer shal	l extend
only to privacy p	protections, and Prov	ider's signature sha	ll not necessarily	bind Pro	vider to oth	er terms	s, such as
price, term, or so	chedule of services, o	to any other provis	ion not addressed	d in this D	PA. The Pro	vider and	d the
Subscribing LEA	may also agree to ch	ange the data prov	ided by Subscribi	ng LEA to	the Provid	er to sui	t the
unique needs of	the Subscribing LEA.	The Provider may w	thdraw the Gene	ral Offer i	in the event	of: (1) a	material
change in the ap	plicable privacy statut	es; (2) a material cha	inge in the service	es and pro	ducts listed	in the or	riginating
Service Agreeme	ent; or three (3) years	after the date of Pro	ovider's signature	to this Fo	orm.		
Subscribing LEA	As should send the	e signed Exhibit	<u>"E"</u> to Provider	at the	following	email	address:
_support@co	debender.cc			•			
CODEBENDER							
		-	_	202	23-12-11		
BY:	J/1			oate: <u>~~</u>			
Drintad Nama	Brett Hagman		Title/Position: C	TO			
Printed Name: _			_Hitle/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 **Nashua School District** and the Provider.

**PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO

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

By: Mackenzie Yarletts Date: 2024-03-12

Printed Name: Mackenzie Yarletts Title: Director of Technology

SCHOOL DISTRICT NAME: Monomoy Regional School District

DESIGNATED REPRESENTATIVE OF LEA:

Name: Holly Thyng

Title: Data, Compliance, and Assessment Specialist

Address: <u>425 Crowell Road</u> Phone: <u>508-815-5866</u>

Email: hthyng@monomoy.edu