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

1.	Offer	of	Terms
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Provider offers the same privacy protections found in thi	is DPA between it and PIE	asantoale 107
("Originating LEA") which is dated , to any o	other LEA ("Subscribing LEA") who	accepts this Genera
Offer of Privacy Terms ("General Offer") through its si	gnature below. This General Offe	r 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 provis	sion not addressed in this DPA.	The Provider and the
Subscribing LEA may also agree to change the data p	rovided by Subscribing LEA to the	e Provider to suit the
unique needs of the Subscribing LEA. The Provider m	nay withdraw the General Offer i	in the event of: (1)
material change in the applicable privacy statues; (2) a	material change in the services a	and products listed in
the originating Service Agreement; or three (3) year	s after the date of Provider's si	gnature to this Forn
Subscribing LEAs should send	the signed	Exhibit "E
to Provider at the following email address: sfarn		
to Provider at the following critical address:		
PROVIDER: News Literacy Project		
7	Date: 05/05/2	2023
BY: Shaslynn Farnsworth	Date:Date	
		t the Otestano
Printed Name: Shaelynn Farnsworth	Title/Position: Sr. Director of Pa	artnersnip Strategy
,		
2. Subscribing LEA		
A Subscribing LEA, by signing a separate Service Agreeme	ent with Provider, and by its signat	ure below, accepts
the General Offer of Privacy Terms. The Subscribing LEA	and the Provider shall therefore be	e bound by the same
terms of this DPA for the term of the DPA between the		
and News Literacy Project		
**PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MU	ST DELIVER NOTICE OF ACCEPTAL	NCE TO PROVIDER
PURSUANT TO ARTICLE VII, SECTION 5. **		

Subscribing LEA:

By: <u>Casie Hanson</u> Date: <u>2024-12-05</u>

Printed Name: Casie Hanson Title: Instructional Technology Facilitator

SCHOOL DISTRICT NAME: <u>Iroquois County CUSD 9</u>

DESIGNATED REPRESENTATIVE OF LEA:

Name: Casie Hanson

Title: Instructional Technology Facilitator

Address: 1411 W. Lafayette St

Phone: <u>815-432-2112</u>

Email: casie.hanson@watsekaschools.org