EXHIBIT "E"

GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

Provider offers the same privacy protections found in this DPA between it and [Insert Name of Originating LEA] ("Originating LEA") which is dated [Insert Date], 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 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 this Form. Subscribing LEAs should send the signed Exhibit "E" to Provider at the following email address: info@stickity.co

provided by Subscribing LEA to the Provider to suit the Provider may withdraw the General Offer in the event of: statues; (2) a material change in the services and produ or three (3) years after the date of Provider's signature to signed Exhibit "E" to Provider at the following email add	ne unique needs (1) a material chects listed in the control this Form. Sub	of the Subscribing LEA. The nange in the applicable privacy originating Service Agreement; scribing LEAs should send the
Name of Provider:		
BY: DesignEd Schools LLC	Date:	04/17/23
Printed Name: Lauren Heil	Title/Position:	CEO
2. Subscribing LEA		
A Subscribing LEA, by signing a separate Service Agree accepts the General Offer of Privacy Terms. The Subscibound by the same terms of this DPA for the term of the LEA] and the Provider. **PRIOR TO ITS EFFECTIVE NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT Name of LEA:	ribing LEA and the DPA between the NESS, SUBSCF	the Provider shall therefore be e [Insert Name of Originating RIBING LEA MUST DELIVER
Name of EEA.		
BY:	Date:_	
Printed Name:	Title/Position:	
SCHOOL DISTRICT NAME:		
DESIGNATED REPRESENTATIVE OF LEA:		
Name:	Title: _	
Address:		_
Telephone Number:Ema	ail:	