STANDARD STUDENT DATA PRIVACY AGREEMENT

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AGREEMENT TYPE

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LEA

and

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Provider

By: *Brent Gines*   Date: 2024-12-10
Printed Name: Brent Gines   Title: IT Director

SCHOOL DISTRICT NAME: South Summit
DESIGNATED REPRESENTATIVE OF LEA:
Name: Brent Gines
Title: IT Director
Address: 285 E 400 S
Phone: 4357834301
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