## EXHIBIT "E"

## **GENERAL OFFER OF PRIVACY TERMS**

## 1. Offer of Terms

Provider and the Subscri	bing LEA (whose name is indicated b	pelow) by signing this General Offer of Privacy Terms
("General Offer") agree	to be bound by the same terms as t	he DPA between Provider and <u>Rose Bud School District</u>
("Original LEA") dated	2024-02-07 Provider and	d Subscribing LEA agree that the information below will be
replaced throughout the	DPA with the information specific to	o the Subscribing LEA filled in below for the Subscribing LEA.
This General Offer shall e	extend only to the terms set forth in	this DPA and shall not bind Provider or Subscribing LEA to any
other terms entered into	between Provider and Original LEA	A. Any commercial terms, such as price, term, or schedule of
services, or relating to Su	ubscribing LEA's use of the Provider'	's Services shall be determined solely between Provider and
Subscribing LEA. The Pr	ovider and the Subscribing LEA may	also agree to change the Student Data indicated on the
Schedule of Data to suit	the unique needs of the Subscribing	LEA. The Provider may withdraw the General Offer in the
event of: (1) a material c	hange in the applicable privacy state	utes; (2) a material change in the Services and products listed
in the Service Agreemen	t; or one (1) years after the date of	Provider's signature to this Form. Subscribing LEAs should
send the signed <b>Exhibit</b> '	<u><b>'E"</b></u> to Provider at the following ema	il address: districts@classdojo.com.
ClassDojo, Inc.	~ ^ A	
-	Mainten 10 Dai MA	00/06/0004
BY:	Callection	Date: <u>02/06/2024</u>
Duinted Names - Fligotte	Maiaa	District Dorto carbins
Printed Name: Elisette	e vveiss	_Title/Position: <u>District Partnerships</u>
1. [Name of Subscribin	g LEA]("Subscribing LEA")	
<b>L</b>	,	
A Subscribing LEA, by sig	ning a separate Service Agreement v	with Provider, and by its signature below, accepts the General
Offer of Privacy Terms. *	*PRIOR TO ITS EFFECTIVENESS, SUB	SCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO
PROVIDER PURSUANT TO	ARTICLE VII, SECTION 5. **	
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BY: Jeremy (	Wells	Date: 08/21/24
Printed Name: Jerei	my Wells	_Title/Position: Technology Coordinator
SCHOOL DISTRICT NAM	E: Cedarville Public Schools	
DESIGNATED REPRESEN	TATIVE OF LEA:	
Name:	Jeremy Wells	
ivallie.	<u> </u>	
Title:	Technology Coordinator	
Title.		
Address:	5900 Pirates Point, Cedarville	e, AR 72932
	479-474-7220	
Telephone Number:	110 717 1220	
Emaile	jwells@cedarvilleschools.org	<b>!</b>
Email:	·	<del></del>