

The designated representative for the LEA for this DPA is:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The designated representative for the Provider for this DPA is:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**IN WITNESS WHEREOF**, LEA and Provider execute this DPA as of the Effective Date.

LEA [ \_\_\_\_\_ ]

By: Dale Roberts Date: 10/24/2022

Printed Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

By: Stephanie Prieto

Date: 2025-02-06

Printed Name: Stephanie Prieto

Title: District Admin

SCHOOL DISTRICT NAME: Good Foundations Academy

DESIGNATED REPRESENTATIVE OF LEA:

Name: Jana Adams

Title: Office Manager

Address: 5101 W 1050 S

Phone: 801-393-2950

Email: jadams@gfautah.org