EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms							lean i	Caat.	Cabaa	ol Diotriot
Provider offers the	same priva	cy prote	ections	found in this	DPA be	tween it	and [County	School	DISTRICT _]
("Originating LEA")) which is a	dated [<u>C</u>	08/13/20	24], to	any oth	er LEA ("	Subscribing	g LEA")	who ac	ccepts this
General Offer of Pr	ivacy Terms	("Genei	ral Offei	") through it:	s signatu	ire below	. This Gene	ral Offe	r shall e	xtend only
to privacy protection	ons, and Pro	ovider's	signatuı	e shall not n	ecessari	ly bind Pr	ovider to o	ther ter	ms, suc	ch as price,
term, or schedule o	f services, o	r to any	other p	rovision not a	ddresse	d in this D	PA. The Pro	ovider a	nd the S	ubscribing
LEA may also agree	e to change	the data	a provid	led by Subscr	ibing LE	A to the	Provider to	suit the	e uniqu	e needs of
the Subscribing LE	A. The Provi	ider may	/ withdr	aw the Gene	ral Offe	r in the e	vent of: (1)	a mate	erial cha	inge in the
applicable privacy	statues; (2)	a mate	rial cha	nge in the se	ervices a	and produ	ucts listed	in the c	originati	ng Service
Agreement; or thre	ee (3) years	after th	e date	of Provider's	signatur	re to this	Form. Subs	scribing	LEAs sh	nould send
the signed	<u>Exhibit</u>	<u>"E"</u>	to	Provider	at	the	followin	g e	mail	address:
			_> I	egal@	clay	or c	0m			
Clever Inc.		_		c gar @	CIE	/ C 1.0	OIII			
DocuSigned by:]								
BY: Wendy Yu						Da	te:	08/19	9/2024	1
6F09436D8277463										
Printed Name: Wendy Yu				Title/Position: Director of Legal and Privacy						
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2. Subscribing LEA

A Subscribing LEA, by signing a separate Service Agreement with Provider, and by its signature below, accepts the General Offer of Privacy Terms. The Subscribing LEA and the Provider shall therefore be bound by the same terms of this DPA for the term of the DPA between the [Iron County School District] and the Provider. **PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. **

By: <u>Jana Adams</u>
Date: <u>2025-02-06</u>
Printed Name: <u>Jana Adams</u>
Title: <u>Office Manager</u>

SCHOOL DISTRICT NAME: Good Foundations Academy

DESIGNATED REPRESENTATIVE OF LEA:

Name: <u>Jana Adams</u>
Title: <u>Office Manager</u>
Address: <u>5101 W 1050 S</u>
Phone: <u>801-393-2950</u>
Email: <u>jadams@gfautah.org</u>