## **EXHIBIT E: GENERAL OFFERS OF TERMS**

Page 1 of 2: OFFER OF TERMS	
Provider and the Subscribing LEA (named below) agree Offer") that they are bound by the same Salem-Keizer Public Schools	e by signing this General Offer of Privacy Terms ("General terms as the DPA between Provider and (" <b>Originating LEA</b> ") dated 11/01/2024
information specific to the Subscribing LEA filled in be extend only to the terms set forth in this DPA and shall other terms entered into between Provider and Origina	tion below will be replaced throughout the DPA with the elow for the Subscribing LEA. This General Offer shall not necessarily bind Provider or Subscribing LEA to any ating LEA. Any commercial terms, such as price, term, or se of the Provider's Services shall be determined solely
Provider must complete the Addendum template provious and all Subscribing LEAs in accordance with the notification and contents. With regard to a Subscribing LEA, an Ad Subscribing LEA is notified by Provider. If an Addendu	B" in accordance with sections 1.2 and 1.3 respectively, led by the A4L Community and notify the Originating LEA ation provisions of this DPA, of the Addendum's existence dendum is automatically incorporated into this DPA when m modifies Exhibit "B", the LEA will have thirty (30) days ed it will become incorporated into the DPA between the
the event of: (1) a material change in the applicable p	ure use or for LEAs that have not already accepted it) in privacy statutes; or (2) a material change in the Services Notification of a withdrawal shall be submitted to
Subscribing LEAs shall send the signed Exhibit markb@fabulingua.com	t "E" to Provider at the following email address:
The below signatory confirms they are authorized to bi	nd their institution to this DPA as in its entirety.
RESOURCE NAME(S):	
[ Fabulingua	]
	]
PROVIDER: [Fabulingua Inc.	1
Signed By:	Date: 11/01/2024
Printed Name: Mark Begert	Title/Position: CEO

## Exhibit "E" (continued)

Originating LEA: Salem-Keizer Public Schools

Resource Names: Fabulingua

Provider Name: Fabulingua Inc

Page 2 of 2: Insert Name of 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 Originating LEA and the Provider. \*\*PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER.\*\* Please note, by signing this Exhibit you are also agreeing to any language that may be included in Exhibits to the Originating DPA beyond this Exhibit "E". The below signatory confirms they are authorized to bind their institution to this DPA as in its entirety.

Subscribing	LEA: Insert Name of Subscribing LEA		
Signed By:		Date:	
Printed Name	e:	Title/Position:	
School Distric	ct Name:		
Designated	Representative of LEA:		
Name:	Chrystiana Silva	Title:	Tech Support Field Coordinator
Address:	1340 State St Salem Or 97301		
Telephone:	503-576-0815	Email:	silva_chrysti@salkeiz.k12.or.us

**Notices to Subscribing LEA:** The Provider and Subscribing LEA are each responsible to promptly notify the other Party of changes to the notice information.

## **Security Notices to Subscribing LEA**

[ LEA Security Name ]	
[ LEA Security Role ]	
[ LEA Security Postal Address ]	
[ LEA Security Email Address ]	
[LEA Name	With a copy to (if provided):
[LEA Role	LEA Legal Counsel
[Street, City, State	LEA Legal Counsel Postal Address ]
[LEA Email Address ]	LEA Legal Email Address
[LEA Role ] [Street, City, State ]	LEA Legal Counsel  LEA Legal Counsel Postal Address