EXHIBIT E: GENERAL OFFERS OF TERMS

Page 1 of 2: OFFER OF TERMS

• , ,	gree by signing this General Offer of Privacy Terms ("General ame terms as the DPA between Provider and ("Originating LEA") dated
information specific to the Subscribing LEA filled i extend only to the terms set forth in this DPA and s other terms entered into between Provider and Original Control of the Control of	rmation below will be replaced throughout the DPA with the n below for the Subscribing LEA. This General Offer shall thall not necessarily bind Provider or Subscribing LEA to any ginating LEA. Any commercial terms, such as price, term, or is use of the Provider's Services shall be determined solely
Provider must complete the Addendum template pro and all Subscribing LEAs in accordance with the not and contents. With regard to a Subscribing LEA, an Subscribing LEA is notified by Provider. If an Adde	it "B" in accordance with sections 1.2 and 1.3 respectively, ovided by the A4L Community and notify the Originating LEA tification provisions of this DPA, of the Addendum's existence Addendum is automatically incorporated into this DPA when ndum modifies Exhibit "B", the LEA will have thirty (30) days be even it will become incorporated into the DPA between the
the event of: (1) a material change in the applicab	future use or for LEAs that have not already accepted it) in le privacy statutes; or (2) a material change in the Services nt. Notification of a withdrawal shall be submitted to
Subscribing LEAs shall send the signed Exl	hibit "E" to Provider at the following email address:
The below signatory confirms they are authorized to	o bind their institution to this DPA as in its entirety.
RESOURCE NAME(S):	
	j
PROVIDER: []
Signed By: P. Mi. M.	Date:
Printed Name:	Title/Position:

Exhibit "E" (continued)		
Originating LEA: Resource Names: Provider Name:		
Page 2 of 2:		
the General Offer of Privacy Terms. terms of this DPA for the term of EFFECTIVENESS, SUBSCRIBING Please note, by signing this Exhibit	parate Service Agreement with Provider, and by its signature below, a The Subscribing LEA and the Provider shall therefore be bound by the DPA between the Originating LEA and the Provider. **PRIOR IS LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVING you are also agreeing to any language that may be included in Expenditure. The below signatory confirms they are authorized to bisety.	ne same TO ITS IDER.** hibits to
Subscribing LEA:		
Signed By:	Date:	
Printed Name:	Title/Position:	
School District Name:		
Designated Representative of LE	A:	
Name:	Title:	
Address:		
Telephone:	Email:	
Notices to Subscribing LEA: The other Party of changes to the notice Security Notices to Subscribing [[[[otify the
] With a copy to (if provided):	
]