# VIRGINIA SCHOOL DATA PRIVACY AGREEMENT

## **EXHIBIT "E" OPTIONAL**

### GENERAL OFFER OF DATA PRIVACY TERMS TO OTHER SUBSCRIBING DIVISIONS

### **1. PROVIDER Offer of Terms**

Provider offers the same privacy protections found in this DPA between it and Division to any other school district/division ("Subscribing Division") who accepts this General Offer though its signature below. Provider agrees that the information on the next page will be replaced throughout the Agreement with the information specific to the Subscribing Division filled in below. This General Offer shall extend only to privacy protections and Provider's signature shall not necessarily bind Provider to other terms, such as price, term, or schedule of services, or to any other provision not addressed in this DPA. Provider and Subscribing Division may also agree to change the data provided by Division to Provider to suit the unique needs of the Subscribing Division. Provider may withdraw the General Offer in the event of: (1) a material change in the applicable privacy statutes; (2) a material change in the services and products subject listed in the Originating Service Agreement; (3) or three (3) years after the date of Provider's signature to this form. Provider shall notify Division in the event of any withdrawal so that this information may be transmitted to Subscribing Divisions.

# PROVIDER AUTHORIZED REPRESENTATIVE

Provider Signature

ider Signature:	Date: 8/28/2020
Provider Name:	Renaissance Learning, Inc.
Contact Name & Title:	Contract Administrator
Mailing Address:	PO Box 8036, Wisconsin Rapids, WI 54495
eMail Address:	contracts@renaissance.com
Telephone:	(800) 338-4204

#### 2. SUBSCRIBING DIVISION Acceptance of Terms

Subscribing Division (other Local Educational Agency), by signing a separate Service Agreement with Provider, and by its signature below, accepts this General Offer of Privacy Terms. Subscribing Division and Provider shall therefore be bound by the same terms of this DPA.

#### SUBSCRIBING DIVISION AUTHORIZED REPRESENTATIVE

Subscribing Division Signature:

Date:
Date:

Subscribing Division Name:
Contact Name & Title:
Mailing Address:
eMail Address:
Telephone: