Textlesp

The designated representative for the LEA for this DPA is:
Name: Shannon lessly Title: Dir. of Curics technolog
Address:Address:
Phone: 802-583-7947 Email: Slessly@husl.org
The designated representative for the Provider for this DPA is:
Name: Karlene Feeney Customer Success Manage
Address: 500 Unicorn Park Drive
888-248-0652
IN WITNESS WHEREOF, LEA and Provider execute this DPA as of the Effective Date.  Harwood Union Unified School Distric_
By: Date: 0 8/16/2021  Printed Name: Sharron lessly Title/Position: Dir. Curic & Technology
- Street to the street of the
Provider []
By: Karlene Feeney 07/08/2021 Date:
Printed Name: Karlene Feeney Title/Position: Customer Success Mana

## EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

"Originating LFA") w		A L	rwood Union Unified Sch
	ne privacy protections found in this DP nich is dated [0], to any	A between it and [	ng IFA") who accents this
	y Terms ("General Offer") through its sig		
	and Provider's signature shall not nece		
	rvices, or to any other provision not addr		
	change the data provided by Subscribin		
_	ne Provider may withdraw the General		
	ues; (2) a material change in the servi B) years after the date of Provider's sign		
,		at the follow	
	end Exhibit E s .		
Texthelp	1		
DV. AJ	<i>E</i> )1	Date:	07/08/2021
BY:		Date:	
Printed Name: Tack	DolanTitle/Positio	n· President	
Triffica Name:sac	Tricy i osicio	mrresident	Management of the Control of the Con
0.01			
2. Subscribing LEA	igning a separate Service Agreement wit	h Providor and by its s	ignature helow accents the
	y Terms. The Subscribing LEA and the Pr		NED
	n of the DPA between the [ Harwood Un	an onlined School Die	d the Provider. **PRIOR TO
	n of the DPA between the <u>Litalwood on</u> JBSCRIBING LEA MUST DELIVER NOTIC		
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BY:	JBSCRIBING LEA MUST DELIVER NOTICE**	Date:	
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BY: Printed Name:	JBSCRIBING LEA MUST DELIVER NOTICE.**  an non lessly Title  Title  ME: Harwood Unitid	Date: S/	PROVIDER PURSUANT TO
BY: Printed Name: SCHOOL DISTRICT NAME	JBSCRIBING LEA MUST DELIVER NOTICE.**  an non lessly Title  Title  ME: Harwood Unitid	Date: S/	PROVIDER PURSUANT TO
BY: Printed Name: SCHOOL DISTRICT NAM	JESCRIBING LEA MUST DELIVER NOTICE:  AT NOT LESSY  TITLE  NTATIVE OF LEA:	Date: 8/1  Position: Diff	PROVIDER PURSUANT TO
BY:  Printed Name:  SCHOOL DISTRICT NAM DESIGNATED REPRESE Name:	JESCRIBING LEA MUST DELIVER NOTICE.**  Title  ME: Harwood Vrifical  NTATIVE OF LEA:  Sharron lessly  Director of Curricular	Date: 8/1  Position: Diff	PROVIDER PURSUANT TO
BY:  Printed Name:  SCHOOL DISTRICT NAM DESIGNATED REPRESE Name:  Title:  Address:	JESCRIBING LEA MUST DELIVER NOTICE.**  Title  ALE: Harwood Unitical  NTATIVE OF LEA:  Director of writing  340 Mad River Por	Date: 8/1  Position: Dir. C	PROVIDER PURSUANT TO
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