

DPS FUEL CODE

AGREEMENT

The Denver Public Schools is pleased to present you with the Fuel Code. It represents the District's trust in you and your empowerment as a responsible employee of the District.

I, the undersigned, as a Fuel Code user and responsible party, agree to comply with the terms and conditions of this Agreement and all applicable DPS Policies and Procedures including but not limited to:

- Approved and Prohibited Use of the Code
- Reporting Lost or Stolen Codes

I acknowledge that I have read and understand the above-mentioned Policies and Procedures. I understand that the Fuel Code cannot be used for personal items and that the Code may only be used to acquire fuel for DPS vehicles and equipment. I understand that I am responsible for the security of the Fuel Code while in my possession. I understand that I am responsible for unauthorized use of the Code. I further understand that improper use of the Fuel Code may result in disciplinary action, up to and including recommendation of termination. Should I use the Fuel Code or knowingly **allow** others to use the Fuel Code for fueling a non-DPS vehicle or for personal items, I authorize the District to deduct from my salary or from other monies owed me, an amount equal to the total of the personal use. I also agree to allow the Denver Public Schools to collect any amounts owed by me even if the District no longer employs me. I agree that the District has the right to charge me for any legal fees or collections cost for any amounts that I owe. I understand that the District may terminate my Fuel Code privileges at any time for any reason without giving me notice of such termination of privileges. I agree to notify my Supervisor immediately of any problems.

Employee: _____

Date: _____

**DPS FUEL CODE
APPLICATION FOR FUEL CODE**

Vehicle Unit #: _____ School Number: _____
 Employee ID Number: _____
 Employee: _____ DPS Phone Number: _____
 Department: _____
 Expiration: _____

Required Code Limits

Please select one of the following Fuel CODE Restriction Groups

	1	Transaction per Day	Authorized Only for Vehicle or School	(enter vehicle or school number)
	More than 1	Transaction per Day	Authorized for all Vehicles in Department	(Enter Department)

We, the undersigned, request the above employee be issued a Fuel Code based on the above information. We have read the Fuel Code Agreement and agree to all the terms and conditions stated therein.

SIGNATURE & PRINTED/TYPED NAME

DATE

Director/Dept Head: _____

Supervisor/Responsible Party: _____

Email: _____

DO NOT WRITE BELOW THIS LINE

Fleet Department Approval: _____ Date: _____

Code Number: _____ PIN Number: _____