

Time Card/ Paycheck Form

Employee Name: _____

Date of Occurrence: _____ Date of Submission: _____

Description (Reason for Glitch): _____

Missed Punches (Beginning and End of Shift)

Missed punch IN: _____ (Time)

Missed punch OUT: _____ (Time)

Missed Rest Period

Missed punch OUT: _____ (Time)

Missed punch IN: _____ (Time)

I understand it is my responsibility to utilize the time clock appropriately.

- 4 Missed punches in a rolling 3 months= Verbal
- 5 Missed punches in a rolling 3 months= Written
- 6 Missed punches in rolling 3 months =Final
- 7 Missed punches in a rolling 3 months = Termination
- Payroll Correction

Employee Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Payroll Correction Request Date Submitted: _____ Form #: _____