

Timesheet Correction Form

Employee name: _____ Date: _____

Department: _____ Supervisor: _____

This form must be used to report any timekeeping errors.

The above-named employee had an error on the time records for week ending: _____. Please update the time records to reflect the following information:

Date of Error	1 st In-Time	1 st Out-Time	2 nd In-Time	2 nd Out-Time	Leave Code	Leave Hours	Reason for Error

Employee signature: _____

Manager signature: _____

Payroll signature: _____