**Timecard Correction Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name:** |  | **Department:** |  |
| **Pay Period Ending:** |  | **Date Submitted:** |  |

**Section 1: Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name:** | John Doe | **Employee ID:** | EMP-4587 |
| Job Title |  | Supervisor |  |

**Section 2: Correction Details**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date Worked** | **Original Time In** | **Original Time Out** | **Corrected Time In** | **Corrected Time Out** | **Total Hours (Corrected)** | **Reason for Correction** |
| 10-Oct-2025 | 09:30 AM | 05:00 PM | 09:00 AM | 05:30 PM | =((D2+CELL("difference"))-(C2)) | Missed punch |
| 11-Oct-2025 | 08:00 AM | 04:00 PM | 08:00 AM | 05:00 PM | =((E3-D3)\*24) | Overtime not recorded |
| 12-Oct-2025 | 09:00 AM | 04:00 PM | 09:00 AM | 04:00 PM | =((E4-D4)\*24) | Correct entry |

**Section 3: Explanation**

|  |
| --- |
| **Describe the reason for correction:** |
|  |

**Section 4: Authorization**

|  |  |  |  |
| --- | --- | --- | --- |
| **Role** | **Name** | **Signature** | **Date** |
| Employee |  |  |  |
| Supervisor |  |  |  |
| HR/Payroll Officer |  |  |  |

**Section 5: For Payroll Use Only**

| **Payroll Processed By** | **Date Processed** | **Adjustment Applied (Yes/No)** | **Notes** |
| --- | --- | --- | --- |
|  |  | ☐ Yes ☐ No |  |

**Instructions:**

1. Employee completes and signs this form for any missed or incorrect time entries.
2. Supervisor reviews and approves the correction.
3. Submit the approved form to HR/Payroll for processing before the next pay cycle.