

LISD Missed Punch Form

Employees: If a punch is missed, please complete this form and return it to your supervisor with your time sheet. Use a separate form for each date. Enter the actual time you arrived or left, not your scheduled time.

Supervisors: Please enter missing punches no later than the last day of a payroll period. The form should then be submitted to Jeannie Martin.

Name:		Employee ID#:		
Supervisor:				
Record your missed punches below, sign and return to your supervisor.				
1) Date:	In Time:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Out Time:	AM <input type="checkbox"/> PM <input type="checkbox"/>
2) Date:	In Time:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Out Time:	AM <input type="checkbox"/> PM <input type="checkbox"/>
REQUIRED - Reason for missed punch (refer to number above): 				
Employee Approval: I certify that the punches reported above represent the punches missed on the Time Clock.				
Signed: _____			Date: _____	
Supervisor Approval: I confirm that I have first-hand knowledge or other suitable means of verifying the work performed by the employee;				
Signed: _____			Date: _____	

For Payroll Use Only

Punches Corrected ☐

Comments _____