La Joya Independent School District Kronos/Absence from Duty Adjustment Form

Employee Name:				Date Submitted:		
Employee ID:				_ Campus/Dept	Memorial Middle School	
Note: Please	mark reason	for missed pu	nch			
Forgot to pun	ch in					
Forgot to pun						
Error messag	e:				Other:	
Examples: 05-111 Punch 06-2 Non-Hor		Specify				
_		Missed Punch				
Date	IN	OUT	IN	OUT		
Explanation:						
Explanation.	_					
_						
					. — . — . — . — . — . — . — . — . — .	
				ABSENCE		
Date	Code		Full or	Half Day	Reason	Code
					Personal/Family Illness	Sick 1
					Personal Leave	Person 1
					School Business	School Business
					Jury Duty	Jury
					Subpoena	Subpoena
					Military Leave	İ
					Other/Dock	Other
					Non-Contract Day (Contract	NCD
					Day 226 or Greater Only)	
Employee's Signature:					Date:	
Supervisor's \$	Signature:				Date:	
Note: Form	needs to be to	urned in within	24 hours fo	r processing		
					. — . — . — . — . — . — . — . — . — .	
			For	TimeKeeper Use	Only	
Date Received:				_		
Date Adjusted:				_		
Adjusted By:				_		

Revised: 01/16/2017