

**La Joya Independent School District
Kronos Time Sheet Adjustment Form**

Employee Name: _____

Date Submitted: _____

Employee ID: _____

Campus/Dept: _____

Note: Please mark reason for missed punch

- Forgot to punch in
- Forgot to punch out
- Error message: _____
Specify

Other: _____

Examples:

- 05-111 Punch Rejected
- 06-2 Non-Home Employee

<i>Missed Punch</i>				
Date	IN	OUT	IN	OUT

Explanation: _____

Date	Code	ABSENCE		Comments
		From	To	

Reason	Code	Reason	Code
Personal Illness	Sick 1	School Business	School Business
Family Illness	Fam L 1	Jury Duty	Jury
Death Immediate Family	Death Immediate	Subpoena	Subpoena
Death Non Immediate Family	Death Non Immediate	Military Leave	Military
Personal Business	Person 1	Other	Other

Employee's Signature: _____

Date: _____

Supervisor's Signature: _____

Date: _____

Note: Form needs to be turned in within 24 hours for processing

For TimeKeeper Use Only

Date Received: _____

Date Adjusted: _____

Adjusted By: _____