

# Attendance Correction Request Form

**Employee Name**

**Employee ID**

**Department**

**Date of Attendance**

**Type of Correction Requested**

Select

**Details / Reason for Correction**

**Correct Time(s) (if applicable)**

e.g. Punch-In: 09:00 AM, Punch-Out: 06:00 PM

---

Employee Signature & Date

---

Supervisor/Manager Signature & Date

- Please ensure all details are accurate before submitting this form.
- Attach any supporting documents if necessary.
- Correction requests may be subject to management approval and company policy.
- Retain a copy of the submitted form for your records.