



**MADISON DISTRICT
PUBLIC SCHOOLS**

Prepare. Aspire. Succeed.

26524 John R · Madison Heights · MI · 48071 (248) 399-7800 FAX (248) 399-2229

Randy Speck
Superintendent

TIMECARD ADJUSTMENT FORM

Building Supervisors/ Department Heads/ Secretaries - Please forward this completed form to payroll. Payroll will not make the adjustment until the original signed form is received.

Employee's Name: _____

Building: _____

Reason for adjustment:

_____ Missing IN punch

_____ Missing OUT punch

_____ Lost Badge

_____ Forgot Badge

_____ Overtime - hours worked _____

_____ Other, please specify: _____

Date being adjusted: _____

Punch being added or change to: _____

Employee Signature: _____ Date: _____

Supervisor or Supervisor Designee signature: _____ Date: _____