

# Student Employee Time Correction Form

(For Use to Record Time in a Previous Pay Period)

Name (Print Clearly) \_\_\_\_\_

Dept/Account No. \_\_\_\_\_

**WEEK ENDING: Saturday** \_\_\_\_\_

ID # (Required) \_\_\_\_\_

\*Time in and out must be recorded to the nearest quarter hour\*

DAY	DATE	IN - A.M.	OUT	IN	OUT- P.M.	TOTAL
SUN						
MON						
TUES						
WED						
THUR						
FRI						
SAT						
<b>TOTAL HOURS WEEK 1</b>						

**WEEK ENDING: Saturday** \_\_\_\_\_

\*Time in and out must be recorded to the nearest quarter hour\*

DAY	DATE	IN - A.M.	OUT	IN	OUT- P.M.	TOTAL
SUN						
MON						
TUES						
WED						
THUR						
FRI						
SAT						
<b>TOTAL HOURS WEEK 2</b>						

\_\_\_\_\_  
EMPLOYEE'S SIGNATURE (I Certify That My Hours are Correct)

**TOTAL HOURS APPROVED  
FOR PAST PAY PERIOD**

\_\_\_\_\_  
ADP APPROVER SIGNATURE

\_\_\_\_\_  
PRINT NAME

Email or Fax to [payroll@webster.edu](mailto:payroll@webster.edu) or (314) 246-8237