



REQUEST FOR ATTENDANCE ADJUSTMENT

Name:				Dept.:
Position:				Date Prepared:
DETAILED JUSTIFICATION				
Emp No.	Date	Late In	Early Out	Reason
<div style="display: flex; justify-content: space-between; align-items: flex-start;"><div style="width: 45%; text-align: center;"><div>_____</div><div>Employee's Signature</div></div><div style="width: 45%; text-align: center;"><div>_____</div><div>Approved by: Dept. Manager /Project Manager/Director</div></div></div> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"><div style="width: 45%; text-align: center;"><div>_____</div><div>Noted by: HR Operations Manager/HR Director</div></div><div style="width: 45%; text-align: center;"><div>_____</div><div>Payroll In Charge</div></div></div>				