



# SOUTHERN MISSOURI TECHNICAL INSTITUTE

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ADMINISTRATION  
Dr. Josh Cotter, Director  
Dr. Wesley Davis, Superintendent

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## Time Correction Form

<b>Name:</b>	<b>Program:</b>
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**Record your missed punches below, sign and return to your program coordinator.**

Date:	Clock In:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Clock Out:	AM <input type="checkbox"/> PM <input type="checkbox"/>
Date:	Clock In:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Clock Out:	AM <input type="checkbox"/> PM <input type="checkbox"/>
Date:	Clock In:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Clock Out:	AM <input type="checkbox"/> PM <input type="checkbox"/>
Date:	Clock In:	AM <input type="checkbox"/> PM <input type="checkbox"/>	Clock Out:	AM <input type="checkbox"/> PM <input type="checkbox"/>

Reason for missed punch:

**Student Approval: I certify that the punches reported above represent time I was present in the program.**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Supervisor Approval: I confirm that the punches reported above are correct, to the best of my knowledge.**

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**OFFICE USE ONLY**

**Attendance Officer:**

**Signed:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

**Date Corrected:** \_\_\_\_\_