

S^D Associates LLC

Behavioral Services Assessment, Consultation, Training and Direct Service
PO Box 4169, White River Junction VT 05401 www.sdplus.org referrals. (802) 235-9322

Time & Attendance Update/Change Form

Staff Name: _____ Staff # _____

Program:

☐ 01 Williston ☐ 02 Windsor ☐ 03 Erving ☐ 12 FUV ☐ 13FPV ☐ 22FLL ☐ 23
Bennington

☐ Date of Update: _____ Date submitted: _____

My Schedule has changed:

- ☐ Program was cancelled
- ☐ Stayed late – Explain: _____
- ☐ Left early – Explain: _____
- ☐ Arrived Late – Explain: _____
- ☐ Arrived Early – Explain: _____
- ☐ Did not clock in or out

Punch In should have been:

- Time: _____ Level 1: _____ Level 2: _____ Level 3: _____ Level 4: _____

Punch Out should have been:

- Time: _____
- ☐ When I went to punch in I could not locate the correct level.

Correction to Punch In:

- Time: _____ Level 1: _____ Level 2: _____ Level 3: _____ Level 4: _____

Correction to Punch Out:

- Time: _____

- ☐ Other: _____

Submitted by: _____ Date: _____

This form documents any changes to your scheduled shift. Ideally these are submitted the day of, but these **must be submitted** within 24 hours or you will be paid for the hours scheduled.

How to Submit (2 Ways):

1. Drop off forms to designated spot by Admin

2. Email the form to timekeeper@sdplus.org

S^D Associates, LLC.

Updated 10.19.2016