Chicago Public Schools

HISTORICAL CORRECTION FORM (for Post Pay Period corrections)

Employee Section: *Please type or print below information (all fields must be completed to process form)*

School: _____   Oracle Unit #:_____

Employee Name: _____   Employee ID#: _____

Contact Phone #: _____   Email: _____

DETAILS SECTION:

Date Worked	Hours worked	Actual Time Punch In	Actual time Punch Out	Correct Overtime or Pay Code (if applicable)
09/6/2016	8 hrs.	8:00am	4:00pm	REG

Reason: (check one): ☐ Forgot To Punch In   ☐ Forgot To Punch Out   ☐ KRONOS Clock Down

☐ Overtime not charged   ☐ Pay Code Error *(wrong pay code applied to employee hours)*

Reason: Other (specify if none of the above apply):

_____   _____
Employee Signature   **Date**

I certify that I have reviewed and confirm that the information contained herein is true and accurate. I understand that I may be subject to repercussions (i.e. suspension, dismissal, and/or further actions) for any falsification of hours or time contained herein. This form will be retained by CPS and in the event of an audit, CPS may at its discretion request any and all supporting documentation corresponding to, or documenting the hours and time claimed.

PRINCIPAL / DESIGNEE USE ONLY:

Employee Bucket Position Number: _____ *(only applicable to process Overtime)*

_____   _____
Principal / Designee Signature   Date

NOTE: Failure to complete this form may result in loss of pay for the day in question. Submit a form for each day you require a correction to previous pay period. It is your responsibility to obtain the appropriate approvals and to submit the form in a timely manner to ensure accuracy of payroll records.

Questions can be directed to SSC Contact Center: 773-535-5800.