



PAYROLL DEPARTMENT  
 1270 SEIBERT ADMINISTRATION BUILDING  
 MAIL STOP 5250  
 PHONE: 387-2935 FAX: 387-2937

KRONOS CORRECTION FORM

1. To credit Sick or Vacation hours use a Negative Sign (-) before the number of hours.
2. Form must be signed, dated with a contact phone number or it will be returned (call Payroll for ID Numbers).
3. Fax or hand carry completed forms to the Payroll Department.

Department Name/Org ID: \_\_\_\_\_

Pay Period #: \_\_\_\_\_

Employee Name	Department Number (formerly cost center)	Employee ID Number	Reg Hours	Retro Hours	OT Hours	Sick Hours	Vac Hours	Specific Instructions

Authorizing Signature: \_\_\_\_\_

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

Phone: \_\_\_\_\_