ROSTERELF

Missed Clock-In/Out Form

Time Recording Exception Report

Template Version 1.0 | June 2026

Submit Promptly

This form should be submitted on the same day as the missed clock-in/out, or as soon as practicable. Delays in submission may result in payroll processing issues.

Section 1: Employee Details

Full Name *

Employee ID

Position / Job Title *

Department / Team *

Manager / Supervisor Name *

Date of Request *

Section 2: Shift Information

Date of Shift *

Scheduled Start Time *

Scheduled End Time *

Work Location / Site *

Section 3: Type of Exception

Please indicate what was missed (select all that apply):

- [ ] Missed clock-in at start of shift
- [ ] Missed clock-out at end of shift
- [ ] Missed clock-out for break
- [ ] Missed clock-in from break

- [ ] Both clock-in and clock-out missed
- [ ] System recorded incorrect time
- [ ] Other (please specify below)

If other, please specify:

Section 4: Actual Times Worked

Please provide the actual times you worked:

Actual Start Time *

Actual End Time *

Break Start Time

Break End Time

Total Hours Worked (excluding breaks) *

Section 5: Reason for Missed Clock-In/Out

Please indicate why you missed clocking in or out:

- [ ] Forgot
- [ ] Time clock not working / system error
- [ ] Badge / access card not working
- [ ] Queue at time clock - would have been late to start
- [ ] Called away urgently before clocking out
- [ ] Was working remotely / off-site
- [ ] Emergency situation
- [ ] Other (please explain below)

Detailed explanation: *

Section 6: Verification

Please provide verification of your attendance:

- [ ] Witness can verify my attendance

- [ ] Manager was aware I was working
- [ ] Email / system activity timestamps available
- [ ] Building access logs available
- [ ] Customer / client interaction records
- [ ] Work output / deliverables completed during shift
- [ ] CCTV footage available
- [ ] No verification available

Witness Name (if applicable)

Witness Position

Witness Contact

Section 7: Pattern Review (Manager Use)

For manager reference:

Number of missed clock-in/out incidents in past 3 months

- [ ] Pattern identified - additional training recommended
- [ ] Pattern identified - performance discussion required
- [ ] No concerning pattern

Section 8: Employee Declaration

- I declare that the times provided in this form are accurate and reflect my actual working hours.
- I understand that providing false information about hours worked is considered serious misconduct.
- I understand that repeated missed clock-in/out events may result in performance management action.
- I agree to make every effort to ensure accurate time recording in the future.

Employee Signature

Signature: _____ Date: _____

Section 9: Manager Approval

Decision:

- [ ] Approved - hours will be recorded as stated

- [ ] Approved with modifications (see notes)
- [ ] Declined - insufficient verification
- [ ] Declined - pattern of non-compliance
- [ ] Pending - additional information required

Manager notes / reason for decision:

Manager Signature

Manager Name: _____

Signature: _____ Date: _____

Section 10: Payroll Processing (Office Use)

Date Correction Entered

Entered By

System Reference Number

Disclaimer

This is a general HR template provided for informational purposes only. It does not constitute legal advice. Laws, awards, and workplace obligations vary by industry and jurisdiction. Employers must review and customise this template to suit their specific circumstances. Independent legal or HR advice may be required. RosterElf accepts no liability for any reliance on this document without appropriate review and customisation.