



CSU FULLERTON

Auxiliary Services Corporation

Serving the University in the Spirit of Excellence

## TIME TRAK ADJUSTMENT FORM

**NAME:** \_\_\_\_\_ **CAMPUS WIDE ID#** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **DEPT. #** \_\_\_\_\_ **TITAN CARD#** \_\_\_\_\_

**ADJUSTMENT:** Time In \_\_\_\_\_

Out to Lunch \_\_\_\_\_

In from Lunch \_\_\_\_\_

Time Out \_\_\_\_\_

**REQUEST:** Overtime \_\_\_\_\_ hour(s)/minutes

**REASON:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Employee Signature                      Date

\_\_\_\_\_  
Supervisor Signature/ Approval                      Date