


<p align="center"><b>Company Name</b></p> 	<p><b>Application for Reconsideration of Attendance</b></p>	<p><b>Document No:</b></p>
		<p><b>Rev. No. :</b> <b>Date :</b></p>

Employee Name : \_\_\_\_\_

Employee Code : \_\_\_\_\_

Department. : \_\_\_\_\_

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

Time : From \_\_\_\_\_ To \_\_\_\_\_

Reason for not punching : \_\_\_\_\_

\_\_\_\_\_

Date:

Signature of Applicant:

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**Reporting Manager's Approval**

Approved

Rejected

Comments:

\_\_\_\_\_

Date:

\_\_\_\_\_

Manager Signature: