<table>
<tr><td>

**Office of the Chief Financial Officer**
**MONTGOMERY COUNTY PUBLIC SCHOOOLS**
**Rockville, Maryland 20850**

</td><td>

**PACS CORRECTION**

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</table>

Employee Name _____ Employee I.D. Number _____

Location Name _____ Location Number _____ Job Code _____

**TYPE OF PAYROLL**

☐ Professional
☐ Supporting Services
☐ Short-term Substitute Teachers
☐ Long-term Substitute Teachers
☐ Summer Supplemental Employment (SSE)
☐ Other _____

**REASON**

☐ Posting Error
☐ Employee Error
☐ H/R Information
☐ Other _____
_____
_____

Pay Period Being Corrected: From _____/_____/_____ to _____/_____/_____

## *Daily Attendance As Was Reported*

**Please correct ONLY the day or days reported in error. It is not necessary to report the entire 2-week period.**

**REGULAR HOURS WORKED** – Write the hours worked in the day columns below.

| PAY CODE | SAT | SUN | MON | TUE | WED | THU | FRI | SAT | SUN | MON | TUE | WED | THU | FRI | BIWEEK TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

**ABSENCE HOURS** – Write the type of absence in the pay code column provided and hours of that absence in the day columns.

| PAY CODE | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

**OVERTIME HOURS** – Write the type of overtime in the pay code column provided and hours of that overtime in the day columns.

| PAY CODE | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

## *Daily Attendance As Should Have Been Reported*

**REGULAR HOURS WORKED** – Write the hours worked in the day columns below.

| PAY CODE | SAT | SUN | MON | TUE | WED | THU | FRI | SAT | SUN | MON | TUE | WED | THU | FRI | BIWEEK TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

**ABSENCE HOURS** – Write the type of absence in the pay code column provided and hours of that absence in the day columns.

| PAY CODE | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

**OVERTIME HOURS** – Write the type of overtime in the pay code column provided and hours of that overtime in the day columns.

| PAY CODE | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

**FOR PAYROLL USE ONLY**

Access Number _____

Payroll Action:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

**THIS FORM WILL BE RETURNED WITHOUT ACTION IF ANY INFORMATION IS NOT PROVIDED OR IS INCORRECT**

1. PACS Corrections must be originals with original signatures. **(NO FAX COPIES)**
2. All signatures must be in black ink, no pencil or rubber stamps.

_____ _____/_____/_____        _____ _____/_____/_____
*Signature, Employee*            *Date*                  *Signature, Authorized*            *Date*

_____ _____/_____/_____        _____
*Signature, Immediate Supervisor*    *Date*                  *Title*

**MCPS Form 280-7, Rev. 12/16**

# DIRECTIONS

☐ **Please correct only the day or days reported in error. It is not necessary to report the entire 2-week pay period.**

☐ Keep a photocopy of any PACS Correction submitted at your location for audit purposes.

☐ Temporary Part-time is posted online using the prior pay period option. The only exception to this is for decreasing reported time. This is still corrected by sending the paper PACS Correction form to the Employee and Retiree Service Center for processing.

☐ To view a prior pay period go into your attendance screen. Change the pay period end date to the one you wish to view. Click on your inquire icon. The status column will say final. Put an X in the attendance you wish to view and click on the attendance release box. Locate the employee you wish to view. Place an X in the FC box. Click on the inquire icon. You will now be able to view the employee's individual attendance for that pay period.

## FRACTION OF HOUR

Report fraction of an hour of time worked:

| MINUTES WORKED | REPORT TENTHS |
|---|---|
| 0–05 | 0 |
| 6–11 | 1 |
| 12–17 | 2 |
| 18–23 | 3 |
| 24–29 | 4 |
| 30–35 | 5 |
| 36–41 | 6 |
| 42–47 | 7 |
| 48–53 | 8 |
| 54–59 | 9 |

## ABSENCE PAY CODES

| | |
|---|---|
| ADL | Administrative Leave |
| ANN | Annual Leave |
| BFI | Bereavement—Immediate |
| BFO | Bereavement—Other |
| CCP | Child Care Leave with Pay |
| CCN | Child Care Leave w/o Pay |
| CVL | Civil |
| *EMR | Emergency |
| HOL | Holiday |
| IIF | Illness in Family |
| MIL | Military |
| NPR | Reported Leave w/o Pay |
| NPS | Scheduled Leave w/o Pay |
| PER | Personal Leave |
| PRO | Professional Leave |
| *SCK | Sick Leave |
| UBL | Union Business Leave |
| UIP | Unusual or Imperative with Pay |
| WCP | Worker's Compensation |

\* **EMR is the only absence code that can be posted for long-term substitutes.**

## OVERTIME (OT) PAY CODES

| | |
|---|---|
| CBP | Call-Back Pay |
| DEC | Delayed Opening/Early Closing |
| EDW | Emergency Day Worked |
| HRR | Holiday at Regular Rate |
| OTR | Overtime |
| OUR | Outside Use at Regular Rate |
| OUP | Outside Use at Time and 1/2 |
| SER | School Event at Regular Rate |
| SEP | School Event at Premium Rate |
| STB | Standby Hours |
| WOH | Hours worked on a holiday |

## REGULAR HOUR PAY CODES

| | |
|---|---|
| REG | Supporting Services and Professional Hours |
| LTS | Long-Term Substitute Teacher Hours |