

CONFIDENTIAL

EMPLOYEE EXIT INTERVIEW FORM

Date: _____

Name: _____ Security Social Number: _____

Location/Department: _____ Supervisor: _____

Hire Date: _____ Termination Date: _____

Starting Position: _____ Ending Position: _____

Starting Salary: _____ Ending Salary: _____

PART I: REASONS FOR LEAVING

More than one reason may be given if appropriate; if so, circle primary reason.

• **RESIGNATION**

- | | |
|--|--|
| <input type="checkbox"/> Took another position | <input type="checkbox"/> Dissatisfaction with salary |
| <input type="checkbox"/> Pregnancy/home/family needs | <input type="checkbox"/> Dissatisfaction with type of work |
| <input type="checkbox"/> Poor health/physical disability | <input type="checkbox"/> Dissatisfaction with supervisor |
| <input type="checkbox"/> Relocation to another city | <input type="checkbox"/> Dissatisfaction with co-workers |
| <input type="checkbox"/> Travel difficulties | <input type="checkbox"/> Dissatisfaction with working conditions |
| <input type="checkbox"/> To attend school | <input type="checkbox"/> Dissatisfaction with benefits |
| <input type="checkbox"/> Other (specify) _____ | |

• **LAID OFF**

- Lack of work
- Abolition of position
- Lack of funds
- Other (specify) _____

RETIREMENT

- Voluntary retirement
- Disability retirement
- Regular retirement

Plans After Leaving

PART II: COMMENTS/SUGGESTIONS FOR IMPROVEMENT

We are interested in what our employees have to say about their work experience with the University. Please complete this form.

1. What did you like most about your job?

2. What did you like least about your job?

3. How did you feel about the pay and benefits?

Excellent Good Fair Poor

- Rate of pay for your job
- Paid holidays
- Paid vacations
- Retirement plan
- Medical coverage for self
- Medical coverage for dependents
- Life insurance
- Sick leave

4. How did you feel about the following:

Very Satisfied Slightly Satisfied Neutral Slightly Dissatisfied Very Dissatisfied

- Opportunity to use your abilities
- Recognition for the work you did
- Training you received
- Your supervisor's management methods
- The opportunity to talk with your supervisor
- The information you received on policies, programs, projects and problems
- The information you received on departmental structure
- Promotion policies and practices
- Discipline policies and practices
- Job transfer policies and practices
- Overtime policies and practices
- Performance review policies and practices
- Physical working conditions

COMMENTS:

5. a) If you are taking another job, what kind of work will you be doing?

b) What has your new place of employment offered you that is more attractive than your present job?

6. Could the University have made any improvements that might have influenced you to stay on the job?

Other remarks (optional):

Employee's Signature

Date

DO NOT WRITE BELOW THIS LINE. OFFICE USE ONLY.

- Discussed with employee
- Right to file for unemployment benefits
- Conversion of benefits
- If retiring, state option for payment of unused leave _____

Interviewer's Signature

Date