

EXIT INTERVIEW

Employee Name: _____ Position/Department: _____

Reason for Separation: _____

Length of Service:

- Less than 3 months
 3-6 months
 6-9 months
 9-12 months
 1-4 years
 4-9 years
 10+years

Please take a few minutes to review the following items. Decide which were positive (+) and which were negative (-) during your employment. Place an X in the appropriate column. Management uses the results to understand how effective our actions have been in creating an appropriate environment for our employees. Please be candid in your ratings.

| | (+) | (-) |
|--|-----|-----|
| Advancement Opportunities | | |
| Benefits | | |
| Chance to Learn New Skills | | |
| Concern/Respect for Individual Employees | | |
| Cooperation/Communication Between Employees | | |
| Encouraging Input/Suggestions from Employees | | |
| Equipment/Tools to Do the Job | | |
| Fair Treatment of Employees | | |
| Immediate Supervisor | | |
| Information/Company Communications | | |
| Job Security | | |
| Loyalty of the employees | | |
| Pay | | |
| Physical Working Conditions | | |
| Recognition | | |
| Safe Environment | | |
| The way your department is run | | |
| Training Opportunities | | |
| Work Load | | |
| Work Schedule/Hours | | |

Over →

SUMMARY

Who supervised your work? _____

How did you feel about your supervisor? _____

Did you ever take any complaints or concerns to your supervisor? _____ If so, how were they handled? _____
If not, why? _____

How frequently did you receive feedback? _____ Was the feedback helpful and constructive? _____

Did your supervisor treat your co-workers fairly? _____ If not, what did you observe that leads you to believe they were treated unfairly? _____

What did you like **most** about your job? _____

What did you like **least** about your job? _____

Are there any benefits you feel should have been offered? _____

On a scale of 1-10 (1=very low, 10=very high), how would you rate the morale in your department? _____

What suggestions would you share to make this a better place to work? _____

What led you to seek work elsewhere (if applicable)? _____

Before making your decision to resign, did you discuss your concerns with a supervisor? _____ If no, why not? _____

If yes, what was the result of that discussion? _____

If given the opportunity, would you like to work here again? _____

Do you have any other comments? _____

Received by: _____

Date: _____

Employee's Signature: _____

Date: _____