

EMPLOYEE EXIT INTERVIEW QUESTIONNAIRE

We are interested in your opinion on matters relating to your employment at the XXXXXXX. Please complete this questionnaire on your work experience here and return it to the HR Department. We will use this information to evaluate our current practices and to make changes as appropriate.

Employee Name _____	Manager _____
Job Title _____	Hire Date _____
Department _____	Exit Date _____

PERSONAL INFORMATION

1. How long were you employed by the XXXXX?
 less than 1 year between 1 year and 3 years over 3 years
2. What is the *primary* reason you decided to leave? Please write #1 on the appropriate line.
3. What is the *secondary* reason you decided to leave? Please write #2 on appropriate line.

- | | |
|---|--|
| <input type="checkbox"/> Advancement opportunities not available
<input type="checkbox"/> Benefits unsatisfactory
<input type="checkbox"/> Career change
<input type="checkbox"/> Health – Personal or relative
<input type="checkbox"/> Job elimination
<input type="checkbox"/> Overtime excessive
<input type="checkbox"/> Personal – Other
<input type="checkbox"/> Relationship with manager unsatisfactory
<input type="checkbox"/> Relocation
<input type="checkbox"/> Retirement | <input type="checkbox"/> Return to school
<input type="checkbox"/> Salary unsatisfactory
<input type="checkbox"/> Stay at home
<input type="checkbox"/> Training was inadequate
<input type="checkbox"/> Type of work unsatisfactory
<input type="checkbox"/> Work conditions unacceptable
<input type="checkbox"/> Work location unsatisfactory
<input type="checkbox"/> Work schedule unsatisfactory
<input type="checkbox"/> Workload unfair or too heavy |
|---|--|

4. If you are going to another job, will it be the same type of work? Yes No
 If no, what type of work will you be doing? _____
5. Could anything have been done to prevent you from leaving? Yes No
 If yes, what could we have done? _____

MANAGEMENT

	Always	Usually	Sometimes	Rarely	Never
1. Communicated clear expectations and performance standards.	5	4	3	2	1
2. Communicated information needed to do my job.	5	4	3	2	1
3. Provided timely feedback regarding performance and needed improvements.	5	4	3	2	1
4. Provided training/equipment that helped me do my job.	5	4	3	2	1
5. Provided coaching for career development.	5	4	3	2	1
6. Recognized employees for a job well done.	5	4	3	2	1
7. Answered questions accurately and in a timely manner.	5	4	3	2	1
8. Listened to and resolved employees' concerns.	5	4	3	2	1
9. Treated employees <u>without</u> favoritism.	5	4	3	2	1
10. Followed agency policies and practices.	5	4	3	2	1
11. Exhibited willingness to admit and correct mistakes.	5	4	3	2	1
12. Encouraged feedback and welcomed suggestions.	5	4	3	2	1

DEPARTMENT

	Always	Usually	Sometimes	Rarely	Never
1. The employees within my department cooperate to get the job done.	5	4	3	2	1
2. My department and other departments cooperate to get the job done.	5	4	3	2	1
3. My department operates productively and efficiently.	5	4	3	2	1
4. The workload within my department is fairly distributed.	5	4	3	2	1

AGENCY

1. Why did you originally join the XXXXXX?

2. What did you like most about working for the XXXXXX?

3. What did you like least about working for the XXXXXXXX?

4. Compared to other employers where you have worked, how would you rate the XXXXXX a place to work?

Better than
Most
3

About the
Same
2

Worse than
Most
1

5. Would you consider working for the XXXXX? Please explain in the space provided below:

_____ Yes

_____ No