EXIT INTERVIEW QUESTIONAIRE

Name	_Race/Sex	Div	vision/Secti	ion	
Job Title	Hire Da	te	Last	Day of Employmen	ıt
1. Please indicate your reason for leaving:					
2. Did you understand the mission of the agency?	☐ Yes ☐ N	o			
3. Did you ever offer suggestions, relate problems, seek advice or request information from management? Yes No					
4. If yes, was management responsive?					
5. Were you kept informed regarding changes in policies, procedures, and practices of the agency? Yes No					
6. Would you consider returning to work for this agency? Yes No					
7. Were the duties and responsibilities of your position clearly explained to you? Yes No					
8. Do you feel you received adequate training to per	form your job resp	onsibilities?	Yes Yes	☐ No	
9. Check the one that best describes your workload. Too much for one person					
Occasionally heavy, but just about right mo	st of the time				
Just right, not really over or under worked					
Not enough, did not fully take up my time					
Please use the following rating scale in recording your responses in the section below:					
	=Good 3=Fair	4Po		5=No Opinion	
 Communication between myself and the supervise Relationship with my supervisor Guidance from my supervisor 	or 1 1	2 3 2 3 2 3	4 4 4	5 5 5	
4) Relationship with co-workers	1	2 3	4	5	
5) Advancement opportunities	1	2 3	4	5	
6) Rate of pay for your job	1	2 3 3	4	5 5	
7) Cooperation and teamwork 8) Resolving complaints or problems	1	2 3	4 4	5	
9) Working conditions	î	2 3	4	5	
10) EPMS Program	1	2 3	4	5	
11) Fair and equal treatment	1	2 3	4	5	
12) Agency recognition program	1	2 3	4	5	
13) Communication within the Agency	1	2 3	4	5	
14) Communication within your Division15) Responsiveness of the HR Office	<u>1</u> 1	2 3 3	4 1	5 5	
16) Agency Training Programs	1	2 3	4	5	
17) Orientation	1	2 3	4	5	
18) State Government Benefits package	1	2 3	4	5	

Do you have any suggestions for improving any of the above?

What did you like about your job and the Agency?

What did you dislike about your job and the Agency?

Please provide additional comments or suggestions on the reverse side of this form.