

EXIT INTERVIEW FORM

YOUR COMMENTS ARE IMPORTANT TO US. PLEASE COMPLETE THE QUESTIONS ON THIS FORM. YOUR ANSWERS WILL HELP US DEVELOP RECOMMENDATIONS FOR IMPROVEMENT. PLEASE BE CANDID.

NAME:

TITLE:

DATE OF HIRE:

DATE OF RESIGNATION:

1. MOST IMPORTANT REASON FOR LEAVING:

2. WAS THE INFORMATION GIVEN TO YOU ABOUT HOURS, SALARY, AND JOB

DUTIES AN ACCURATE REFLECTION OF WHAT YOU FOUND ON THE JOB?

3. WERE YOU ADEQUATELY PREPARED TO PERFORM YOUR JOB? IF NOT, WHAT

COULD HAVE BEEN DONE TO HELP YOU PERFORM MORE EFFECTIVELY?

4. WHAT DID YOU LIKE BEST ABOUT WORKING FOR THE AGENCY?

5. WHAT DID YOU LIKE LEAST ABOUT WORKING FOR THE AGENCY?

6. DID YOU RECEIVE SUFFICIENT INFORMATION ABOUT YOUR PERFORMANCE?