**EXIT INTERVIEW**

Name: Date:

Final Position: Department:

Hire Date: Separation Date:

1. If you decided to quit working for our company, why?

1. If this was an involuntary termination, what is your understanding of why you were terminated?

1. Did you feel sufficiently trained and oriented for your job?

1. Did you feel that you were treated with respect by co-employees?

1. Did you feel that you were treated with respect by management?

1. Did you feel free to discuss suggestions or problems with your supervisor or manager?

1. Did your supervisor or manager provide you with clear instructions and expectations?

1. Do you feel that you could have done your job better if you were provided different or better resources? If so, what resources would you have needed?

1. Do you believe any employees given preferential treatment or discriminated against?

1. Did you witness or have knowledge of any unethical or illegal acts or practices engaged in by any employees of this company?

1. Do you have any suggestions for improving company management?

1. Do you have any suggestions for improving the quality of our goods or services?

1. Do you have any suggestions for improving communication in this company?

1. Do you have any suggestions for improving customer relations in this company?

1. Do you have any suggestions for improving employee motivation in this company?

1. Have you reported all work related injuries to the company either past or present? If not, please advise of injuries:

17. Have you returned, or arranged for the return of, all company property, including, but not limited to, computers, software, documents, financial records, personnel files, equipment and tools, vehicles, credit cards, keys, security cards, parking passes, works in progress, client or customer lists, books, resource materials, and confidential or trade secret items? Yes 🞏 No 🞏 If “no”, please explain.

We know that leaving employment with us gives employees the ability to “tell it like it is.” Please use this as an opportunity to set forth any complaints or concerns you have. Also, please use this as an opportunity to let us know how you think we could have done things better. Use addition paper, if necessary.

Thank you!

Signature Date

Forwarding address:

Interview performed by:

Name: Title:

Department: Date: