We would appreciate you taking a few minutes to answer the following questions as honestly as possible. Your response will be treated with the utmost confidentiality and will not become a part of your personnel file. The information you provide in sections 1 and 10 is required and is extremely important to assist the agency with employee retention strategies.Sections 2 through 9 are optional. Your participation in the exit interview process is appreciated.

**Date of Resignation**: Enter Date

**Section 1 - Reason(s) for Resignation (REQUIRED)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Please describe the main reason(s) you are leaving your positon?** | | | | | | | |
| PER  Personal Reason | WOR  Dissatisfied With Work Conditions | PAY  Dissatisfied With Pay/Benefits | PRM  Dissatisfied with Promotions or Growth Opportunities | CAR  Career Change | JOB  Job Did Not meet Expectations | PSE  Private Sector Employment | RTM  Retirement |

**Section 2 - Personal Factors Contributing to Resignation (OPTIONAL)**

|  |  |  |
| --- | --- | --- |
| **Please indicate the following factors that influenced your decision to leave (Check all that applies)** | | |
| Health Reasons | Family Reasons | Child Care |
| Relocating | Career Change | Commute/Transportation |
| Returning to School | Marriage | Other |

**Section 3 - Work/Job Factors Contributing to Resignation (OPTIONAL)**

|  |  |
| --- | --- |
| **Please indicate the following factors that influenced your decisions to leave (Check all that applies)** | |
| Dissatisfaction with type of work | Dissatisfaction with workload |
| Dissatisfaction with tools and equipment provided | Dissatisfaction with working conditions |
| Dissatisfaction with level of input in decision | Dissatisfactions with training and development received |
| Dissatisfaction with coworkers/teamwork | Dissatisfaction with Supervision received |
| Dissatisfaction with working hours | Dissatisfaction with promotional opportunities |
| Dissatisfaction company policies | Dissatisfaction with work location |
| Dissatisfaction with lack of recognition | Dissatisfaction with the lack of organization vision |

**Section 4 - Pay/Benefits Overall Factors Contributing to Resignation (OPTIONAL)**

|  |  |
| --- | --- |
| **Please indicate the following factors that influenced your decisions to leave (Check all that applies)** | |
| Salary | Retirement benefits/Pension 401k |
| Healthcare Options | Flexible Benefits Options |
| Healthcare cost | Flexible Benefits Cost |
| Leave Benefits | Support of work-life balance |

**Section 5 - Overall Rating of Organization (OPTIONAL)**

|  |  |
| --- | --- |
| **How would you rate the following aspect of the overall organization? (Use the scale 1 – Lowest and 5 – Highest)** | |
| Recruitment process **Select one** | New employee orientation **Select one** |
| Training opportunities **Select one** | Career development opportunities **Select one** |
| Employee morale **Select one** | Fair treatment of employee **Select one** |
| Recognition for a job well done **Select one** | Communication between management and employee **Select one** |
| Cooperation within the agency **Select one** | Interest and investment in employees **Select one** |
| Performance management Process **Select one** | Concern with quality and excellence **Select one** |
| Commitment to customer service **Select one** | Culture **Select one** |

**Section 6 - Overall Rating of your Supervisor (OPTIONAL)**

|  |  |
| --- | --- |
| **How would you rate your supervisor on the following factors? (Use the scale 1-Never, 2-Seldom, 3-Often, 4-Usually, 5-Always)** | |
| Gave performance feedback regularly **Select one** | Recognized accomplishments **Select one** |
| Clearly communicated expectations **Select one** | Treated me fairly and respectfully **Select one** |
| Coached, trained and developed me **Select one** | Provided leadership **Select one** |
| Encouraged teamwork and cooperation **Select one** | Resolved concerns in a timely manner **Select one** |
| Listened to suggestions and feedback **Select one** | Kept employees informed **Select one** |
| Supported work-life balance **Select one** | Provided appropriate and challenging assignment **Select one** |

**Section 7 - Overall rating of your Department/unit (OPTIONAL)**

|  |  |
| --- | --- |
| **How would you rate the following aspect of the overall division/unit (Use the scale 1 – Lowest and 5 – Highest)** | |
| Opportunities for continuous learning **Select one** | Teamwork within the department **Select one** |
| Communication within the department **Select one** | Opportunities for advancement within the department **Select one** |
| Morale within the department **Select one** | Working conditions within the department **Select one** |
| Clear goals and expectations within the department **Select one** | Department culture **Select one** |

**Section 8 - Additional Questions (OPTIONAL)**

|  |  |  |
| --- | --- | --- |
| What lead you to accept the position with our organization? | Please explain: | |
| Were your expectations of the job and this organization met? | Yes  No | Please explain |
| Were your talents and skills used in completion of projects? | Yes  No | Please explain: |
| Was your career path and future with our organization made clear to you? | Yes  No | If not, explain: |
| Were there any positive aspects about your job, manager, or the organization that caused you to say as long as you did? | Yes  No | Please explain: |
| Were there barriers to productivity in your job or work unit? | Yes  No | Please explain: |
| What did you like most about your job? | Please explain: | |
| What did you like least about your job? | Please explain: | |
| What would you suggest to management to make our organization better? | Please explain: | |

**Section 9 - Additional Comments (OPTIONAL)**

|  |
| --- |
| **Please provide any additional comments:** |
|  |

**Section 10 – Required Information**

|  |  |
| --- | --- |
| **Please provide the information below. This information will solely be used for additional data analysis.** | |
| Name: | Agency Name: |
| Division/Unit: | Length of Service: |
| Position Title: | Manager Name: |

**Thank you for providing your feedback. Your participation is greatly appreciated.**

**Please submit the completed from to your Human Resources Office.**