

Exit Interview Questionnaire

NAME (optional): _____

CLASSIFICATION (teacher, administrator, support staff personnel):

POSITION (working title): _____

SUPERVISOR (optional): _____

1. Length of time with the school district (optional):

One year or less	
More than one year, but less than 5 Years	
5 or more years, but less than 10 Years	
10 or more years, but less than 15 Years	
15 or more years, but less than 20 Years	
20 or more years	

2. Did you leave the district for a different job?

Yes	
No	

3. What is your next job? _____.

4. Who is your next employer? _____.

5. Please rate your satisfaction with the following on a scale of 1 to 5 (1 = Low 5 = High):

	1	2	3	4	5
Benefits					
Communication with co-workers					
Communication with supervisor					
Cooperative, friendly work environment					
Organizational Support					
Overall Level of Communication					
Quality of Supervision					
Recognition of my achievements					
Salary					
Training					
Utilization of my skills					

6. Why are you leaving the school district? (please check one)

Other Employment	
Medical Reasons	
Personal	
Relocation	
Return to School	
Retirement	

Comments:

7. Please check each factor that influenced your decision to leave the school district:

Leadership Style	
Advancement Opportunities	
Benefits	
District Policies, Procedures & Administrative rules	
Health Issues	
Educational Opportunities	
Lack of Organizational Support	
Hours Worked	
Lack of Organizational Appreciation	
Moving	
Peer Co-Workers	
Pupil Issues	
Retirement	
Salary	
Direction of the School Board	
Training Opportunities	
Work-related Stress	
Work Load	
Workplace Safety	

Comments:

8. Of the factors you checked in number 7, please select your top three (*do not identify your specific health issue if you cited that item as one of your reasons for leaving the district*):

Reason 1	
Reason 2	
Reason 3	

9. What improvements could be made to your former position to make it more satisfactory or more meaningful?

10. Would you recommend the school district as a potential employer to a friend?

Yes	
No	

11. How can your supervisor improve his/her practices?

12. Is there anything else you would like to share regarding your decision?

Signature of Exiting Employee: _____

Date: (optional) _____

Thank you for your feedback. Please return your completed form to the District Administrator. Your comments will be aggregated with other responses in summary reports.

References

California Public Agency for HR Consulting.

<http://www.cps.ca.gov/workforceplanning/documents/TurnTool3EISFINAL.pdf>

Cyphers, Gary. (2003). *Workforce Data Collection Field Guide for Human Services Agencies*. Washington, DC: American Public Human Services Association.

[www.aphsa.org/Publications/Doc/Workforce%20Data%20Collection%20Field%20Guide%20\(7-30-03\).doc](http://www.aphsa.org/Publications/Doc/Workforce%20Data%20Collection%20Field%20Guide%20(7-30-03).doc)

Nalbantian, Haig R. and Anne Szostak. (2004). *How Fleet Bank Fought Employee Flight*. *Harvard Business Review*, April, 2004.