

PEOPLE'S PLACE II, INC.

EMPLOYEE EXIT INTERVIEW FORM

<input type="checkbox"/> Voluntary Termination	<input type="checkbox"/> Involuntary Termination	<input type="checkbox"/> Refused Interview
<input type="checkbox"/> Part-Time	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Male <input type="checkbox"/> Female
Length of Employment: _____ Date of Interview: _____ Last Day Worked: _____		
Program: _____ Employee Name: _____ Supervisor: _____		

In order to improve working conditions at People's Place we are interested in employees' comments about their experience with us. This information will be used solely for the purpose of making improvements to the agency. Your name will not appear on the survey and this survey will not be kept in your personnel file. **Your answers are anonymous and will be held confidential.**

Work Environment					
1. Please rate the following on a scale from 1 to 5	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
a. Working Conditions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. Scheduled work hours	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c. Morale	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d. Communication within your program	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e. Communication between your program and administration.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Comments & Suggestions: _____					

Career Advancement & Training					
2. Please rate the following on a scale from 1 to 5	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
a. Career advancement opportunities in the agency.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b. How well were your training and development needs assessed and met?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Comments & Suggestions: _____					

Pay & Benefits

3. Please rate the following on a scale from 1 to 5

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
--	-------------------	--------------	---------	-----------	----------------

a. The pay rate for your job responsibilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
---	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

Full-Time Employees please rate the following agency benefits.

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
--	-------------------	--------------	---------	-----------	----------------

a. Paid holidays	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

b. Paid vacation	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

c. Retirement plan options	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
----------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

d. Health insurance cost	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
--------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

e. Health insurance coverage	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
------------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

f. Life insurance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
-------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

g. Sick leave	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
---------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

Comments & Suggestions: _____

Job Satisfaction

4. Please rate how satisfied you were with the following

	Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
--	-------------------	--------------	---------	-----------	----------------

a. The program you worked with	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
--------------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

b. The agency, People's Place II, Inc.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
--	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

c. The responsibilities of your job	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
-------------------------------------	----------------------------	----------------------------	----------------------------	----------------------------	----------------------------

Comments & Suggestions: _____
