

EXIT INTERVIEW FORM

Employee:		Job Title:	
Department:	Employed From:	To:	

Termination: ☐ Voluntary (Resignation, job abandonment) ☐ Involuntary (Layoff, company termination, death)
☐ During 90-day probation

Does employee have another job? ☐ Yes ☐ No

If yes, where: _____

New title: _____

Present salary: _____

New salary: _____

What additional benefits does the new position offer:

Did employee maintain effective working relationships with supervisor and peers?
☐ Yes ☐ No

If no, please explain: _____

How did employee feel about his/her salary:

How did employee feel about his/her progress with the company? _____

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What did employee like best about his/her job? _____

What did employee dislike about his/her job? _____

Other comments from the employee: _____

What could have been done to retain employee? _____

What recommendations does the employee have for making his/her department and the company a better place to work? _____

Interviewer's Comments: _____

Interviewer: _____

Date: _____