

**Northwest Florida Health Network  
Employee Exit Interview Questionnaire**

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It is our agency policy to conduct an exit interview with each employee upon separation. We would appreciate it if you would take the time to answer the following questions as honestly as possible. Your objective feedback can help us improve workplace conditions and make this agency a better place to work.

We believe that the information is of vital importance and will assist in analyzing the factors attributing to turnover. Thank you for your cooperation.

Employee Name \_\_\_\_\_ Position \_\_\_\_\_  
Supervisor \_\_\_\_\_ Interviewer \_\_\_\_\_  
Hire Date \_\_\_\_\_ Termination Date \_\_\_\_\_  
Division \_\_\_\_\_ Date of Interview \_\_\_\_\_

1. What reasons made you decide to leave your current job? (Check all that apply)

- | <i>Primary</i>           | <i>Secondary</i>         |                             | <i>Primary</i>           | <i>Secondary</i>         |                         |
|--------------------------|--------------------------|-----------------------------|--------------------------|--------------------------|-------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Secured better job          | <input type="checkbox"/> | <input type="checkbox"/> | Disliked type of work   |
| <input type="checkbox"/> | <input type="checkbox"/> | Return to school            | <input type="checkbox"/> | <input type="checkbox"/> | Quantity of work        |
| <input type="checkbox"/> | <input type="checkbox"/> | Family circumstances        | <input type="checkbox"/> | <input type="checkbox"/> | Health/physical reasons |
| <input type="checkbox"/> | <input type="checkbox"/> | Quality of supervision      | <input type="checkbox"/> | <input type="checkbox"/> | Working conditions      |
| <input type="checkbox"/> | <input type="checkbox"/> | Problems with work schedule | <input type="checkbox"/> | <input type="checkbox"/> | Transportation problems |
| <input type="checkbox"/> | <input type="checkbox"/> | Compensation                | <input type="checkbox"/> | <input type="checkbox"/> | Career opportunity      |
| <input type="checkbox"/> | <input type="checkbox"/> | Other _____                 |                          |                          |                         |

2. What did you like most about your job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What did you like least about your job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you feel training opportunities were made available to you? Yes  No  Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Did you have the appropriate equipment and resources necessary to perform your job?

Yes  No  Comments:

\_\_\_\_\_  
\_\_\_\_\_

6. Was the job realistically presented to you when you were hired or most recently changed positions?

Yes  No  Comments:

\_\_\_\_\_  
\_\_\_\_\_

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7. Please rate your supervisor in regard to the following areas:

	Almost Always	Sometimes	Never
Demonstrates fair and equal treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided recognition on the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Developed cooperation and teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encouraged/listened to suggestions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resolved complaints/problems in a timely fashion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Followed policies and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided timely feedback (positive & negative)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Did you have the appropriate equipment and resources necessary to perform your job?

Yes  No       Comments:

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9. Would you recommend NWFHN to others as a good place to work?

Yes  No       Comments:

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10. How would you rate the following in relation to your job?

	Excellent	Good	Fair	Poor
Cooperation within your department/program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity for advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance evaluation process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agency Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your salary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Workload expectations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training, orientation and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, as a place to work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Do you have any suggestions for improvement?

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12. Other comments, if any:

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Interviewer Signature

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Employee Signature