

# Exit Form

This form has been developed to assist us to improve our staffing policies and procedures and ascertain attitudes towards the Company by giving employees the opportunity to freely express views without concern that there may be any recrimination.

While it is not compulsory to complete this form, your assistance would be appreciated.

Employee:		Commenced employment:	
Position/Job:		Left employment:	
Department/Location:			

## What are your reasons for leaving?

What prompted you initially to look for another job? (Indicate with (1) for Primary Reasons, (2) for Secondary Reason etc.)

Better career prospects	Travel	
Salary increase	Health	
Return to full time studies	Relocation	
Career change	Domestic	
Incompatibility – job	Working for self	
Incompatibility - management		
If applicable, did you make your discontent known?		<input type="checkbox"/> Yes <input type="checkbox"/> No
What was management's response to this?		
Was any action taken to retain your services?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Explanation:		

How would you rate the working environment within the Company?

Poor

Fair

Average

Good

Excellent

Do you believe you were overqualified for the job?

Yes

No

Comment

Do you have any additional comments on your separation?

If your reason for leaving is “better career prospects”

In what way do you believe there is a lack of career opportunities within the Company?

Did you apply for any internal vacancies?

Yes

No

If no, why?

If yes, what were the outcomes?

How would you rate your access to promotion within the Company?

Poor

Fair

Average

Good

Excellent

How would you rate your access to training within the Company?

Poor

Fair

Average

Good

Excellent

What are you looking for in your new position?

Did the job meet your expectations?

Yes

No

Do you believe the job was oversold to you at the time of recruitment?

Yes

No

### Feelings about the job:

How do you find your working hours?	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
How interesting did you find your job?	<input type="checkbox"/> Not at all	<input type="checkbox"/> Reasonable

How often did your job involve work pressure?

<input type="checkbox"/> Never	<input type="checkbox"/> Seldom	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Often	<input type="checkbox"/> Usually
--------------------------------	---------------------------------	------------------------------------	--------------------------------	----------------------------------

Do you think your remuneration was fair & acceptable compared to others at the Company?

No

Unsure

Yes

How did you believe your salary compared within the marketplace?

<input type="checkbox"/> Well below average	<input type="checkbox"/> Slightly below average	<input type="checkbox"/> Average	<input type="checkbox"/> Slightly above average	<input type="checkbox"/> Well above average
---	---	----------------------------------	---	---

How would you rate your opportunity to access higher salary levels?

<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Average	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
-------------------------------	-------------------------------	----------------------------------	-------------------------------	------------------------------------

How would you describe your working relationship with your manager?

<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Average	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
-------------------------------	-------------------------------	----------------------------------	-------------------------------	------------------------------------

How would you describe your working relationship with others in the Company?

<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Average	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
-------------------------------	-------------------------------	----------------------------------	-------------------------------	------------------------------------

To what extent do you believe you had the opportunity to contribute to the decision-making process in your department?

<input type="checkbox"/> Poor	<input type="checkbox"/> Fair	<input type="checkbox"/> Average	<input type="checkbox"/> Good	<input type="checkbox"/> Excellent
-------------------------------	-------------------------------	----------------------------------	-------------------------------	------------------------------------

How do you perceive morale within the Company?

Low

Average

High

## Recognition

Do you believe that your efforts were acknowledged by your immediate supervisor?

<input type="checkbox"/> Never	<input type="checkbox"/> Seldom	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Often	<input type="checkbox"/> Usually
--------------------------------	---------------------------------	------------------------------------	--------------------------------	----------------------------------

Do you believe your efforts were acknowledged by others in the Company?

<input type="checkbox"/> Never	<input type="checkbox"/> Seldom	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Often	<input type="checkbox"/> Usually
--------------------------------	---------------------------------	------------------------------------	--------------------------------	----------------------------------

Were you given the opportunity and encouragement to improve your work performance?

<input type="checkbox"/> Never	<input type="checkbox"/> Seldom	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Often	<input type="checkbox"/> Usually
--------------------------------	---------------------------------	------------------------------------	--------------------------------	----------------------------------

## Equal Opportunity

Did any perceived acts of discrimination contribute to your decision to leave?

No

Unsure

Yes

Do you believe that discrimination exists within the Company?	<input type="checkbox"/> No	<input type="checkbox"/> Unsure	<input type="checkbox"/> Yes

## Overall feelings about the Company

What do you feel were the main benefits of working for the Company?		
What do you feel were the main disadvantages?		
If the opportunity arose, would you work for the Company again?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, why?		

Employee's Signature:

Date: