

(OPTIONAL) Name: \_\_\_\_\_

## EXIT INTERVIEW FORM

1. Department where employed: \_\_\_\_\_

2. Date of Hire: \_\_\_\_\_ Termination Date: \_\_\_\_\_

3. Reason for Termination:

- Voluntary
- Involuntary
- Retirement
- Medical
- Other

4. If you are leaving CNM for another job, does your new job provide you with:

- better pay \_\_\_\_\_ yes \_\_\_\_\_ no
- better working hours \_\_\_\_\_ yes \_\_\_\_\_ no
- better benefits \_\_\_\_\_ yes \_\_\_\_\_ no
- higher rated job (promotion) \_\_\_\_\_ yes \_\_\_\_\_ no
- other \_\_\_\_\_

5. Is there anything that CNM could have done to keep you employed with us?

\_\_\_\_\_ No \_\_\_\_\_ Yes (please explain)

---

---

---

6. What did you like *best* about CNM, and why?

---

---

7. What did you like *least* about CNM, and why?

---

---

---

Would you like a verbal, one-on-one, exit interview? If so, please contact the appropriate Human Resources Representative that supports your division:

Human Resources Representative for Administration	224-4610
Human Resources Representative for Academic Affairs	224-4605
Human Resources Representative for Student Services	224-4700

Thank you for providing this information. It will help us evaluate our turnover activity and assist us in planning goals for the future to meet employee / employment needs.