**Exit Interview Form**

**Employee name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Work Information**

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last date of employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| Reason for leaving the job \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Job satisfaction score (1 -10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Direct manager score (1 – 10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Company score (1 – 10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Company benefits score (1 – 10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Salary satisfaction score (1 – 10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PTO policy satisfaction score (1 – 10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Communication within the company score (1-10) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Feedback**

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Is there anything we could have done that would have changed your decision to leave?

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Would you consider returning to the company in the future?

🞏 Yes 🞏 No