

## Exit Interview Questionnaire

Name \_\_\_\_\_ Department \_\_\_\_\_  
Job Title \_\_\_\_\_ Hire Date \_\_\_\_\_  
Last Day of Employment \_\_\_\_\_

1. Please indicate reason for leaving USC Aiken: \_\_\_\_\_

- 
- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| 2. Did you ever offer suggestions, relate problems, or seek advice from management?        | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. If yes, was management responsive?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Were you kept informed regarding changes in policies, procedures and practices at USCA? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Would you consider returning to work for USCA?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Were the duties and responsibilities of your position clearly explained to you?         | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Do you feel you received adequate training to perform your job responsibilities?        | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Check the one that best describes your workload   |                          |                          |
| Too much for one person  | <input type="checkbox"/> |                          |
| Occasionally heavy, but just about right most of the time                                  | <input type="checkbox"/> |                          |
| Just right, not really over or under worked  | <input type="checkbox"/> |                          |
| Not enough, did not fully take up my time  | <input type="checkbox"/> |                          |

---

Please use the following rating scale in recording your responses in this section.  
1 = Excellent 2 = Good 3 = Fair 4 = Poor 5 = No Opinion

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Communication between myself and the supervisor | 1 | 2 | 3 | 4 | 5 |
| 2. Relationship with my supervisor                 | 1 | 2 | 3 | 4 | 5 |
| 3. Guidance from my supervisor                     | 1 | 2 | 3 | 4 | 5 |
| 4. Relationship with co-workers                    | 1 | 2 | 3 | 4 | 5 |
| 5. Advancement opportunities                       | 1 | 2 | 3 | 4 | 5 |
| 6. Rate of pay for your job                        | 1 | 2 | 3 | 4 | 5 |
| 7. Cooperation and teamwork                        | 1 | 2 | 3 | 4 | 5 |
| 8. Resolving complaints or problems                | 1 | 2 | 3 | 4 | 5 |
| 9. Working Conditions                              | 1 | 2 | 3 | 4 | 5 |
| 10. EPMS Program – Employee Review Process         | 1 | 2 | 3 | 4 | 5 |
| 11. Fair and equal treatment                       | 1 | 2 | 3 | 4 | 5 |
| 12. Communication within USCA                      | 1 | 2 | 3 | 4 | 5 |
| 13. Communication within your Department           | 1 | 2 | 3 | 4 | 5 |
| 14. Responsiveness of the Human Resources Office   | 1 | 2 | 3 | 4 | 5 |
| 15. USCA's Training Programs                       | 1 | 2 | 3 | 4 | 5 |
| 16. Orientation                                    | 1 | 2 | 3 | 4 | 5 |
| 17. State Government Benefits Package              | 1 | 2 | 3 | 4 | 5 |

---

Do you have any suggestions for improving the above? \_\_\_\_\_

What did you like about your job and USCA? \_\_\_\_\_

What did you dislike about your job and USCA? \_\_\_\_\_

Please share any additional comments or suggestions. Use the reverse side of this form if necessary.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date