

KRSB SCHOOL DISTRICT EXIT INTERVIEW FORM

*Completing this form **is optional**, and neither this form nor any information contained herein shall be placed in your personnel file. The information you provide will help the District monitor its recruiting, training, and retaining of employees.*

Name: _____	How long were you employed with us? _____
Job Title: _____	Building/Department: _____
Why are you leaving the District? (check the box that best describes you reason for leaving.)	
<input type="checkbox"/> Retirement	<input type="checkbox"/> Resignation
<input type="checkbox"/> New Employment	<input type="checkbox"/> Other

Your evaluation of the District (check the box that best describes you employment with the District)

<u>Categories to Rank</u>	<u>Very Satisfied</u>	<u>Satisfied</u>	<u>Dissatisfied</u>	<u>Very Dissatisfied</u>
Nature of job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utilization skills/training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance appraisals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training/development programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunities for advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Salary	<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"/>
Immediate supervisor (IS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(IS) provided fair & equal treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(IS) provided recognition on the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication within your department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication with the District	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morale in your department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School/District management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work load	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climate in my Building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climate in the District	<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"/>
The District lives up to its mission/vision statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**If you marked any of the categories as “Dissatisfied” or “Very Dissatisfied,” please write your explanation below*

What did you like best about your job?

What did you like least about your job?

In what areas could the District improve to retain qualified personnel?

Would you recommend the District as a place to work? Yes No “If “No”, why not?”

If you were dissatisfied or very dissatisfied with any of the areas on the first page, please explain here. Thank you.

Employee Signature (optional) _____ *Date* _____

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