

**UNIVERSITY OF GEORGIA  
EXIT INTERVIEW QUESTIONNAIRE**

We would appreciate your taking the time to answer the following questions as honestly as possible. Your individual responses will not become part of your personnel file. To the extent of the law your individual responses will be held in confidence.

Your response will provide us with data that will assist in the evaluation of salaries, benefit programs and working conditions for faculty and staff of the University of Georgia.

**1. Name (optional):** \_\_\_\_\_

**2. Gender (optional):** \_\_\_\_\_ **3. Ethnicity (optional):** \_\_\_\_\_

**4. Were you**      **Faculty**      **staff?**

**5. What was your title?** \_\_\_\_\_

**6. What was your most recent Division/Department at the University?** \_\_\_\_\_

**7. What was your total length of time employed with the University?** \_\_\_\_\_

**8. How long were you employed with your most recent division?** \_\_\_\_\_

**9. What prompted you to end your UGA employment? (Please check all that apply)**

Type of work	Salary	Health Reasons
Lack of recognition	Work	Family circumstances
Benefits	Conditions	Quality of Supervision
Return to School	Career opportunity	Retirement

Other      **Please use this space to explain.**

**10. Before making your decision to leave, did you investigate the possibility of other employment within the University or your own department (\_\_\_Y/\_\_\_N)? If not, why not?**

**11. Knowing what you know now, if you were to apply for a job here, would you want to:**

- |                               |                              |                             |
|-------------------------------|------------------------------|-----------------------------|
| Work in the same job?         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Work in the same department?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Work for the same supervisor? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**JOB CHARACTERISTICS (Please check appropriate box for each item)**

ITEM	Almost Always	Usually	Seldom	Never
11. My job description accurately reflected my job responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I received an annual performance evaluation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I received adequate training for my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I was encouraged to attend training for future career growth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**COMMUNICATION/COOPERATION**

**How would you rate the following in relation to your job?**

ITEM	Excellent	Good	Fair	Poor
15. Cooperation within your department.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Communications within the University as a whole.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Communications between you and your supervisor.			<input type="checkbox"/>	
18. Potential for career growth.			<input type="checkbox"/>	
19. Opportunity for advancement.			<input type="checkbox"/>	
20. The supervision I received.				

**Please rate the salary and employee benefits provided by the University.**

<b>ITEM</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
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**21. Salary**

**22. Medical Insurance**

**23. Dental Insurance**

**24. Leave Benefits**

**25. Other Fringe Benefits**

**26. Is there any other information Human Resources should know that would help us to understand your decision to leave?**

**Other Comments:**

**Please return to:**  
University of Georgia  
Human Resources, Attn: Workforce Engagement  
215 S Jackson Street  
Athens, GA 30602  
Tel: 706-542-2222 / Fax: 706-542-3284