## **EXIT INTERVIEW QUESTIONNAIRE**

Please give this form to Mandy Grey upon completion

Employee's Name	Job Title
Department	to to
Reason for leaving	
2. If you are going to another place of employment, what does it offer that West Carroll Health Systems does not?	
3. What were the factors that contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your originally accepting a joint of the contributed to your original or your original	bb at West Carroll Health Systems?
4. Did your job measure up to what you thought it would be when you ad	ccepted it?
5. Were you paid fairly for the effort you put forth in your position?	Yes No
6. How did the benefits package compare to other organizations where y	ou worked?
7. Do you feel that your received proper orientation and adequate training	ng?YesNo
8. What is the overall rating of your supervisor in terms of	
Complaint resolution?	
	rs of the department To/from your supervisorWith administration
10. How do you view opportunities for advancement within West Carroll	Health Systems?
11. What constructive comments would you have for administration in re	egard to making this a better place to work?
12. Would you recommend West Carroll Health Systems to a friend as a g	good place to work? Why or why not?
13. During the course of you employment, did you become aware of, or o	did you observe any, conduct or activity that could be considered questionable,
unethical, or illegal at West Carroll Health Systems? YesNo	
14. Please explain and be as specific as possible	
	e compliance officer, or any other individual about you observations? Yes No ce persons, dates, locations, and outcomes
TO BE COMPLETED BY SUPERVISOR:  Employee eligible for rehire? YES NC  Why or why not?	)