EXIT INTERVIEW FORM

Personal Data:

Employee Name: _____

JobTitle: _____

Campus/Dept: _____   Dates Worked _____ - _____

From   To

Forwarding Address: _____

Street Address

_____

City   State   Zip

Phone No.   ( ) _____

Check type of termination:

[   ]   Discharge   [   ]   Retirement
[   ]   Nonrenewal   [   ]   RIF
[   ]   Resignation   [   ]   Extended disability
   [   ]   With notice   [   ]   Other _____
   [   ]   Without notice
                                     _____

Check all applicable reasons for leaving. To be completed by all voluntary resignations only:

[   ]   Moving from district   [   ]   Health reasons
[   ]   Returning to district   [   ]   Family circumstance
[   ]   Dissatisfied with type of work   [   ]   Secured better position
[   ]   Other _____

_____

Comments: _____

_____

Checkout Procedures:

Where applicable, review and discuss the following items:

[   ]   Medical care   [   ]   District property
[   ]   Group Life Insurance   [   ]   Keys
[   ]   Unemployment insurance   [   ]   Books
[   ]   Disability insurance   [   ]   Equipment
[   ]   Health cards   [   ]   Other _____

Comments:

_____

EXIT INTERVIEW (CONTINUED)

Questionnaire:

How would you rate your experience in Raymondville ISD in regard to the following? Check the appropriate box.

	EXCELLENT	GOOD	FAIR	POOR
Working relationship with your supervisor				
Cooperation within department				
Cooperation with other departments				
Adequacy of job orientation and training				
Workload				
Physical working conditions				
Availability of materials/equipment				
Evaluation procedures				
Recognition on the job				
Employee benefits				
Communication within the District				
Central administration support				
Community support for District				
Overall experience with Raymondville ISD				

Comments:

What factors made your employment a positive experience with Raymondville ISD?

Do you have any comments or suggestions to improve Raymondville ISD?

Would you recommend Raymondville ISD to others as a place to work?

[   ]   Yes   [   ]   Yes, with reservation (s)   [   ]   No

Interviewed by _____   Date: _____

Signature of Employee _____