

# EXIT INTERVIEW

Southern West Virginia Community and Technical College

Name \_\_\_\_\_

Current Address \_\_\_\_\_

Forwarding Address \_\_\_\_\_  
(For final wages, W-2 forms, retirement information, etc.)

Supervisor's Name \_\_\_\_\_

Date Hired \_\_\_\_\_

Classification:

Effective Date of Resignation \_\_\_\_\_

Faculty

Classified Staff

Last Working Day \_\_\_\_\_

Administrator

Type of Termination:

Retirement       Discharge

Resignation       Layoff

## State Reason For Separation

(Please check reason that applies)

### \*Resignation:

- Physical Condition
- Family
- Returning to School
- Secured Better Position
- Going into Business for Self
- Leaving the Area
- Lack of Advancement Opportunity

### Disliked

- Hours
- Supervisor
- Type of Work
- Wages
- Working Conditions
- Other Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Discharge:

#### Inadequate

- Ability
- Personality
- Drive
- Efficiency
- Cooperation

- Dishonesty
- Rules Violation
- Absenteeism
- Tardiness
- Accident Prone
- Other Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Layoff:

- Temporary Work
- Reduction of Staff
- Other Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Retirement:

- Age
- Medical

### \*Complete when employee has resigned:

New Employer \_\_\_\_\_ Location \_\_\_\_\_

Nature of Work \_\_\_\_\_

Pay \_\_\_\_\_ Hours \_\_\_\_\_

## Selection

What kind of work have you been doing? \_\_\_\_\_  
\_\_\_\_\_

How would you describe your workload?  Heavy  Medium  Light

What type of work did you do prior to joining Southern? \_\_\_\_\_  
\_\_\_\_\_

Is previous work related to present work assignment?  Yes  No

What type of work do you like best? \_\_\_\_\_

Least? \_\_\_\_\_ Why? \_\_\_\_\_  
\_\_\_\_\_

## Orientation and Training

### General Orientation

Was general orientation on Southern's benefit programs and personnel policies provided for you?  Yes  No

If yes, by whom? \_\_\_\_\_

Did you receive a copy of Southern Personnel Manual?  Yes  No

How would you rate the effectiveness of general orientation?

Excellent  Good  Fair  Poor

Please explain \_\_\_\_\_

What are your suggestions for improvement? \_\_\_\_\_

### Job Orientation

Who explained your job to you? \_\_\_\_\_ How? \_\_\_\_\_  
\_\_\_\_\_

Have you received a copy of your job description?  Yes  No

What are your suggestions for improvement of the Job Orientation process? \_\_\_\_\_  
\_\_\_\_\_

## Training

While employed at Southern:

Has the opportunity to attend courses, seminars, and workshops been made available to you?  Yes  No

Have you attended job related:

- Training Sessions?
- Courses?
- Seminars?
- Workshops?

Have you served on any college committee(s)?  Yes  No

If yes, name of committee(s) and comments: \_\_\_\_\_  
\_\_\_\_\_

## Supervision

Have you had any trouble with your supervisor?  Yes  No

If yes, describe: \_\_\_\_\_  
\_\_\_\_\_

Did you take any complaints to your supervisor?  Yes  No

If yes, how did he/she handle them? \_\_\_\_\_  
\_\_\_\_\_

## Summary

What did you like best about your job? \_\_\_\_\_  
\_\_\_\_\_

What did you like least about your job? \_\_\_\_\_  
\_\_\_\_\_

What did you like best about Southern? \_\_\_\_\_  
\_\_\_\_\_

What did you like least about Southern? \_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PEIA

Health/hospitalization/life insurance coverage terminates the last day of the month in which you are last paid. Under COBRA, you may continue the health/hospitalization portion of your insurance for up to 18 months at your own expense. Dependents may also continue coverage. Contact the Payroll or Human Resources Office for details.

## Retirement

Contact the administrative office of your retirement plan for details and options available concerning accrued retirement contributions. **TIAA/CREF:** 1-800-842-2776 **State Teacher's Retirement:** 1-800-654-4406

## Leave Accumulation

You must turn in your final time card signed by your supervisor on your last day of employment. Annual and sick leave accruals will be updated. Payment for balance of annual leave will be included in your last pay check. Sick leave balances are not paid to employees. You may transfer accrued leave balances to other agencies in the state system. If you are to begin employment with another state agency, request their personnel office to contact Southern for leave certification.

## Other

Before you pick up your last pay check, please:

1. Return the following to the Human Resources Department:
  - a. Personnel Manual
  - b. College Issued Corporate Card
2. Return all keys to your supervisor.
3. Return any equipment you may have borrowed to the appropriate department. (library, maintenance, etc.)
4. Pay in full all monies due Southern. Amounts due may include benefit premiums, Bookstore charges, debts to Business Office, Library, Foundation, etc.

***I certify that all statements I have made in completing this exit questionnaire are, to the best of my knowledge and belief, true and correct.***

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

***I have reviewed this questionnaire and ensured the return of keys and/or equipment issued.***

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

## Exit Interview Checklist

(For Human Resources Office Use Only)

Name \_\_\_\_\_ SSN \_\_\_\_\_ Pos. # \_\_\_\_\_

Contract Months \_\_\_\_\_ Salary Prorated \_\_\_\_\_ Last Day on Payroll \_\_\_\_\_

- |   |   |
|---|---|
| <input type="checkbox"/> Exit Interview Questionnaire | <input type="checkbox"/> Sick Leave Balance _____   |
| <input type="checkbox"/> PEIA Termination Cards:      | Transferred to _____                                |
| Cobra Premium _____                                   | Date _____  |
| Termination Effective _____                           | <input type="checkbox"/> Annual Leave Balance _____ |
| <input type="checkbox"/> Personnel Manual # _____     | Transferred to _____                                |
| <input type="checkbox"/> State of WV ID Card          | Date _____  |
| <input type="checkbox"/> College Issued Credit Card   |   |
| <input type="checkbox"/> Terminated in Data File      |   |
| <input type="checkbox"/> Forwarding Address Noted     |   |