



Please return completed form to:  
 City Clerk  
 PO Box 167  
 410 Adams St  
 Seward, AK 99664  
 907) 224-4046

## City of Seward, Alaska Termination: Exit Interview Questionnaire

The City of Seward appreciates your taking about 8-10 minutes to answer the following questions as honestly as possible. Your individual responses are treated as confidential, and will not become part of your personnel file. Responses are optional. We believe that the information is of vital importance and will assist in analyzing our employee retention and turnover. Thank you for your cooperation!

Name	Employment Date
Department	Termination Date
Position	Supervisor

1. Reason(s) for Leaving (mark as many reasons as apply)

Type of Work

Quality of Supervision

Compensation

Work Conditions

Lack of Recognition

Family Circumstances

City of Seward Culture

Career Advancement Opportunity

Moving from Area

Health Reasons

(City of Seward Termination Exit Interview Questions continued)

2. Before making your decision to leave, did you investigate other options that would enable you to stay?  Yes  No

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

3. What did you think of your supervision in regard to the following?

	Almost always	Sometimes	Never	Comments
Demonstrated fair and equal treatment				
Provided recognition on the job				
Developed cooperation and teamwork				
Encouraged/listened to suggestions				
Resolved complaints and problems				
Followed policies and practices				

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

	Excellent	Good	Fair	Poor	Comments
Cooperation within your department					
Cooperation with other departments					
Communications in your department					
Communications within the City as a whole					
Communications between you and your supervisor					
Morale in your department					

(City of Seward Termination Exit Interview Questions continued)

Job Satisfaction					
Training you received					
Growth Potential					

5. Was your workload usually:

- Too great
- Varied, but all right
- About right
- Too light

6. How did you feel about your salary and the employee benefits?

	Excellent	Good	Fair	Poor	Comments
Base Salary					
Medical Plan					
Dental Plan					
Vision Plan					
Retirement Plan					
Annual Leave program					
Wellness Plan					
Other					

7. Are there any other benefits you feel should have been offered?

- Yes  No

If "Yes", what? \_\_\_\_\_  
 \_\_\_\_\_

8. Any other comments on benefits?

\_\_\_\_\_  
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(City of Seward Termination Exit Interview Questions continued)

9. How frequently did you get performance feedback?

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10. What were your feelings about the performance review process?

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11. How frequently did you have discussions with your supervisor about your career goals?

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12. What did you like most about your job and/or working for the City?

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13. What did you like least about your job and/or working for the City?

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14. What does your new job offer that your job with the City does not?

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15. Why is the new job/company better?

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16. Do you have any suggestions for improvement? Have you raised them in the past?

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17. Would you recommend the City to a friend as a place to work?

Yes, without reservations                       Yes, with reservations     No

18. Additional comments about your job or the City of Seward

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[https://www.shrm.org/resourcesandtools/tools-and-samples/hrforms/pages/termination\\_exitinterviewquestionnaire.aspx](https://www.shrm.org/resourcesandtools/tools-and-samples/hrforms/pages/termination_exitinterviewquestionnaire.aspx)

02/06/18 Carol Griswold