

Exiting from Drake University

On the following pages you will find an Exit Questionnaire that Drake utilizes to help assess why individuals leave the University and receive feedback on what the University can do to improve. Although completion of the form is optional, we ask that you take a few moments to record your thoughts. Your openness and honesty are greatly appreciated. Specific comments will not be shared with any individual department; however, the Director, Human Resources, and the appropriate division vice-president may see an Exit Questionnaire in its entirety. All responses will be tabulated into one general summary that reports trends and totals of the reasons why faculty and staff members leave Drake.

Prior to exiting the University, please forward your completed questionnaire to Kay Bretthauer in Human Resources.

If you have questions about exiting the University, please call Kay Bretthauer at 271-3339.

**DRAKE UNIVERSITY
EXIT QUESTIONNAIRE**

(To be completed by employee prior to exiting from the University)

Name: _____

Date Employed: _____ Date Leaving: _____

Position Title: _____ Department: _____

1. Was your decision to leave the University influenced by any of the following:
(Please check all those applicable.)

- | | |
|---|---|
| <input type="checkbox"/> Moving away from area | <input type="checkbox"/> Better pay |
| <input type="checkbox"/> Secured better job opportunity | <input type="checkbox"/> Lack of interest in type of work |
| <input type="checkbox"/> Return to school | <input type="checkbox"/> Lack of promotional opportunity |
| <input type="checkbox"/> Other _____ | |

2. Do you feel you were accurately informed about the duties/responsibilities of the job you are leaving before you made a decision to accept it?

- Yes No, please explain _____
- _____

3. Do you feel you were given adequate training by the University and/or supervisor to fulfill the duties of your position?

- Yes No, please explain _____
- _____

4. What did you like **MOST** about the job/department you worked in?

5. What did you like **LEAST** about the job/department you worked in?

6. How would you rate each of the following in the department where you worked?

<u>General</u>	<u>Excellent</u>	<u>Good</u>	<u>Poor</u>
The amount of work given to you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The working conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation of people in the department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Supervision

Communicates with people under their supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles complaints/problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates fair/equal treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides recognition when deserved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gives clear and timely instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

7. How would you rate the University in the following areas?

<u>Organization Objectives</u>	<u>Excellent</u>	<u>Good</u>	<u>Poor</u>
Communicates consistent policies and practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides fair rate of pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates fair and objective performance appraisals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is concerned with employee training and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Benefits

Health Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Life Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retirement Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holidays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuition Rebate Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____

8. Do you have any further suggestions or comments to assist us in improving our operation?
