

# XYZ HHA

## EXIT INTERVIEW CHECKLIST

Name of Employee \_\_\_\_\_

Position \_\_\_\_\_

Social Security No. \_\_\_\_\_ Start Date \_\_\_\_\_ End

Date \_\_\_\_\_

1. To be obtained from employee, if applicable:

\_\_\_\_\_ Keys to building/filing cabinets/offices \_\_\_\_\_ Resignation statement for personnel file  
\_\_\_\_\_ Copy of employee handbook \_\_\_\_\_ Credit cards \_\_\_\_\_ Lap top \_\_\_\_\_ Pager  
\_\_\_\_\_ Name badge  
\_\_\_\_\_ New address and telephone no. \_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_

2. To be discussed:

\_\_\_\_\_ If employee has medical insurance coverage, refer to benefits coordinator for COBRA requirements.

\_\_\_\_\_ Other \_\_\_\_\_

3. To give to employee:

\_\_\_\_\_ Record of employment (dates of employment/position(s) held)

\_\_\_\_\_ Final paycheck to be issued (date) \_\_\_\_\_

\_\_\_\_\_ Paycheck to be (check one) \_\_\_\_\_ mailed to employee \_\_\_\_\_ employee will pick up

\_\_\_\_\_ Other \_\_\_\_\_

4. Feedback:

a. Reason for leaving \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b. What did you like about this organization? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. What did you dislike about this organization? \_\_\_\_\_

\_\_\_\_\_

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d. What did you like about your position? \_\_\_\_\_

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e. What did you dislike about your position? \_\_\_\_\_

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f. Were you treated fairly? If no, please explain \_\_\_\_\_

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g. What suggestions could you offer to make this a better place to work?

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h. Were your skills/talents utilized to the fullest? If so, how? If not, why not? \_\_\_\_\_

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i. If you are going to another job, what does that job offer that your job here did not?

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j. How would you evaluate your salary in comparison to the work that you performed? \_\_\_\_\_

k. Would you recommend our organization to a friend as a place to work? If yes, why? If no, why not?

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5.

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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Interviewer

\_\_\_\_\_  
Date

Copy to: Employee & Personnel File