



# Archdiocese of Los Angeles

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## EXIT INTERVIEW

Employee Name: \_\_\_\_\_ Department: \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor/  
Department Head: \_\_\_\_\_

1. Do you feel you had a clear understanding of your job?

Yes       No

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

\_\_\_\_\_

\_\_\_\_\_

2. Did you receive adequate training?

Yes       No

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

\_\_\_\_\_

\_\_\_\_\_

3. Were your job duties clearly defined?

Yes       No

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

\_\_\_\_\_

\_\_\_\_\_

4. Did you have a fair chance to advance to greater responsibility?

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

\_\_\_\_\_

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5. How would you rate your supervisor?

- Very Good                       Good
- Fair                                       Poor

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

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6. How would you rate employee morale in your department and the ACC?

- Very Good                       Good
- Fair                                       Poor

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

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7. How do you feel about the benefits? \_\_\_\_\_

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8. Do you feel that your skills, knowledge, and abilities were appropriately utilized?

- Yes                       No

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

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PLEASE CHECK ONE OR MORE:

9. What did you like about your job?

- Wages                                       Working Conditions
- Supervisors                                       Co-Workers
- Policies                                       Benefits
- Type of Work                                       Hours

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

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PLEASE CHECK ONE OR MORE:

10. What did you particularly dislike about your job?

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Wages        | <input type="checkbox"/> Working Conditions |
| <input type="checkbox"/> Supervisors  | <input type="checkbox"/> Co-Workers         |
| <input type="checkbox"/> Policies     | <input type="checkbox"/> Benefits           |
| <input type="checkbox"/> Type of Work | <input type="checkbox"/> Hours              |

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

11. What suggestions do you have for improving your present job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. What is your reason for leaving? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I confirm that the above statement are true.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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Reviewed by Leadership Team:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date