



ABRAHAM BALDWIN AGRICULTURAL COLLEGE

Office of Human Resources

Exit Questionnaire

Please help us make this institution a better place to work by completing the following survey. Your honesty is greatly appreciated, and your opinions are highly valued. Thank you for your time and effort in completing the survey!

Name: _____ Faculty Staff Administrator

Department/Division: _____ Job Title: _____

Years of Service: _____ Termination Date: _____

1. Why are you leaving the institution?

- Resigned – Found Another Opportunity Resigned – Seeking Another Opportunity
 Resigned – Other Transferred Retiring

1A. Which factors contributed to your decision to leave the institution? (Please check all that apply).

- Better Job Opportunity Better Fringe Benefit Package Return to School Working Conditions
 Family Circumstances Career Opportunity Self-Employment Type of Work
 Seeking Higher Salary Transfer of Family Member Military Service Commuting Distance
 Lack of Recognition Conflict With Management Job Dissatisfaction No opportunity for advancement

Please provide details about why you are leaving: _____

1B. If you are retiring, which factors contributed to your decision to retire? (Please check all that apply).

- Length of Service Family Circumstances No Incentive to Continue Working Lack of Recognition
 No Opportunity for Advancement Conflict with Management Other

Please provide details about why you are retiring: _____

2. Please share suggestions that you feel would lead to improvements in:

- The department/division:
- The institution:
- The University System of Georgia:

3. Did you have the resources, equipment, and information necessary to do your job? Yes No

Comments: _____

4. Please rate your level of satisfaction with the following benefits and services and list any suggestions you have for improvement.

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	Not Applicable
	(1)	(2)	(3)	(4)	(5)	(6)
Rate of Pay	[]	[]	[]	[]	[]	[]
Paid Holidays	[]	[]	[]	[]	[]	[]
Health Insurance	[]	[]	[]	[]	[]	[]
Life Insurance	[]	[]	[]	[]	[]	[]
Sick Leave	[]	[]	[]	[]	[]	[]
Annual Leave	[]	[]	[]	[]	[]	[]
Retirement Plans	[]	[]	[]	[]	[]	[]
Information Technology	[]	[]	[]	[]	[]	[]
Facilities Management	[]	[]	[]	[]	[]	[]
Human Resources	[]	[]	[]	[]	[]	[]
Tuition Assistance Program (TAP)	[]	[]	[]	[]	[]	[]

Suggestions: _____

5. Please rate your immediate supervisor and provide comments on any areas of concern.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
	(1)	(2)	(3)	(4)	(5)
My supervisor is competent in his/her professional field.	[]	[]	[]	[]	[]
My supervisor promoted cooperation within my department.	[]	[]	[]	[]	[]
My supervisor promoted cooperation with other departments.	[]	[]	[]	[]	[]
My supervisor demonstrated fair and equal treatment.	[]	[]	[]	[]	[]
My supervisor was able to handle complaints effectively.	[]	[]	[]	[]	[]
My supervisor clearly communicated instructions and openly discussed problems.	[]	[]	[]	[]	[]
My supervisor clearly explained my job responsibilities and performance standards.	[]	[]	[]	[]	[]
My supervisor followed policies and procedures consistently.	[]	[]	[]	[]	[]
My supervisor encouraged feedback and welcomed suggestions.	[]	[]	[]	[]	[]
My supervisor provided recognition or showed appreciation for quality work.	[]	[]	[]	[]	[]

6. Did the duties identified in the job description closely match the work you actually performed? Yes No

Comments: _____

7. Would you recommend this institution to a friend as a good place to work? Yes No

Comments: _____

8. What are some of the factors that contributed to making your employment here enjoyable? _____

9. Did you receive adequate training and orientation?

New Hire Orientation Yes No

Departmental Training Yes No

Comments: _____

10. How did you find out about opportunities for advancement? _____

11. Did you apply for a promotion or transfer while with the college? Yes No

12. Did you receive a promotion while employed with the college? Yes No

13. Was your workload reasonable for the position you held? Yes No

Comments: _____

14. Would you consider returning to ABAC? _____ If not, why? _____

15. Could your departure have been prevented? _____ How? _____

16. How were the overall working conditions at ABAC? _____

17. Additional Comments: _____

Signature: _____ Date: _____

The college is subject to the provisions of the open records law, which means that confidentiality cannot be guaranteed. However, after this questionnaire has been reviewed by the Human Resources office, it can be destroyed if you wish.