



HUMAN RESOURCES OFFICE
435 Stanley Avenue
Chambersburg, PA 17201
Telephone (717) 709-4089
Fax (717) 709-2320
Website: www.casdonline.org/hr

Employee Exit Interview Form

Name of Employee: _____

Date of separation: _____

Job Title: _____

Job Location: _____

Supervisor: _____

Official reason for separation: _____

How long have you worked in your current assignment: _____

How long have you worked for CASD: _____

What are your future employment plans at this time: _____

What kind of work "climate" did you experience at CASD: _____

What is your reaction to the supervision offered to you while employed at CASD: _____

Did the district provide you with the tools, equipment, supplies, etc. to effectively perform your job? _____ Yes _____ No

If no please explain: _____

Did you return any items given to you by the district?

Inventory (check applicable items returned or date they will be returned)

a.) Keys _____

d.) Cell Phone _____

b.) Tools _____

e.) Vehicle _____

c.) ID badge _____

f.) Other _____

Was the compensation package adequate in terms of:

- 1.) Salary _____ low _____ average _____ high
- 2.) Benefits _____ low _____ average _____ high

Did the district provide enough direction and information about the job you were required to perform? _____ Yes _____ No

If no please explain: _____

Did you belong to a bargaining unit, while an employee of the district? _____ Yes
_____ No If yes, which bargaining unit? _____

Do you think the Administration provided effective leadership?
_____ Excellent _____ Good _____ Fair _____ Poor

Feel free to explain: _____

Can you offer any suggestions as to how the district might be improved? _____

Would you recommend the district as a place to work to friends or associates?
_____ Yes _____ No

Feel free to explain: _____

May we have information to contact you later? _____ Yes _____ No
If yes: Address _____
 Phone _____

****Please note if your address is changing you will need to fill out a new certificate of residence form – this form can be found on the HR website at www.casdonline.org/hr/forms***

Employee Signature _____
Date _____

Additional Comments: _____

