

Human Resources Department Phone (904) 491-9874 Fax (904) 277-9039

EXIT INTERVIEW QUESTIONNAIRE FOR SCHOOL DISTRICT EMPLOYEES

Please complete this form and submit to the Human Resources Department, within 10 days of receipt, by county mail, hand delivery, fax, or U.S. Mail to the address above.

EMPLOYEE'S FULL NAME		EID	LAST DAY FOR PAY
SCHOOL / DEPARTMENT		POSITION	
SCHOOL / DEPARTMENT		FOSITION	
EMPLOYEE'S CURRENT MA	ILING ADDRESS & EMAIL	EMPLOYEE'S C	CURRENT PHONE NUMBER
REASON FOR SEPARATION	FROM DISTRICT		
Voluntary Separation	□ Retirement		
	☐ Employment in Education in Florid	la: District	
	☐ Employment in Education outside	Florida: State	
	☐ Employment outside Education		
	☐ Relocation, Military		
	☐ Relocation, Non-Military		
	□ Continuing Education		
	□ Entrepreneurship		
	□ Raising A Family / Parenthood □ Personal Illness / Disabled		
	□ Family Illness		
	☐ Family / Personal Reasons		
	□ Schedule		
	☐ Inability To Complete Teacher Cert	tification	
	☐ Inadequate Salary		
	□ Inadequate Support		
	□ Inadequate Benefits		
	☐ Inadequate Advancement Opport	unity	
	☐ Stress On The Job		
	☐ Dissatisfaction With Supervisor	15	
	☐ Dislike / Unsuitability For Assigned		
	☐ Resignation In Lieu Of Involuntary	Termination	
	□ Other (Please Specify):		
Involuntary Separation	□ Probationary Period		
	□ Performance		
	☐ Reduction in Force		
Comments:			
ACKNOWLEDGEMENT	and an all NGCS	and the fact of the second	
	return all NCSD property and submi		
	trict may result in a delay in the proce		
	t is not limited to, keys, ID badges, lap action, including, but not limited to the		
	action, including, but not innited to the	ining of a police report and	·
EMPLOYEE'S SIGNATURE			DATE