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www.terrafirmapeo.com

Exit Interview

Employee name: _____ Date: _____

Company name: _____

We appreciate the opportunity to conduct this exit interview. Your objective feedback can help us view our Company through your perspective. We would appreciate your honest opinions about your employment experience with Terra Firma. Thank you.

Please mark in the space provided what best describes your opinion about these aspects of your experience with our Company. Use: VS (Very Satisfied), S (Satisfied), D (Dissatisfied), or VD (Very Dissatisfied).

- | | |
|--|---|
| _____ Your job and the work | _____ Working conditions (physical environment) |
| _____ Utilization of skills and experience | _____ Salary/Compensation |
| _____ Performance appraisals | _____ Company policies |
| _____ Supervision | _____ Benefits programs |
| _____ Opportunities for advancement | _____ Training, orientation, and development programs |
| _____ Workload | _____ Overall work experience |

Please explain any categories which you have marked D (Dissatisfied) or VD (Very Dissatisfied): _____

The primary reason I am leaving the Company is because: _____

If you are leaving to accept other employment, please list any benefits that you will receive that you did not receive at our Company: _____

Please describe your relationship with your supervisor and how it could have been improved, if applicable: _____

Has our Company and/or your supervisor provided enough recognition for your work achievements? If not, please describe how you would have preferred to be recognized: _____

Would you recommend this Company as a place to work? If not, why? _____

I hereby affirm that I do not have any work-incurred injuries at this time.

Employee Signature _____ Date

Additional Comments: _____

For Work-Site Employer/Terra Firma use:					
Date	Initials		Date	Initials	
_____	_____	Notification to payroll	_____	_____	Notification to ins. Carrier
_____	_____	Return access/ID badge	_____	_____	Return keys
_____	_____	Vacation payment	_____	_____	Separation form completed
			_____	_____	Return company credit cards
					COBRA letter
					Group insurance conversion