Exit Interview Form

Your honest feedback helps us improve. Answers are reviewed by HR and shared only in summary.

Employee

FULL NAME

EMPLOYEE ID

DEPARTMENT

EMAIL

PHONE

Feedback

MAIN REASON FOR LEAVING

How would you rate your manager?

○ 1 ○ 2 ○ 3 ○ 4 ○ 5

How would you rate growth opportunities?

○ 1 ○ 2 ○ 3 ○ 4 ○ 5

Would you recommend us as an employer?

○ Yes ○ Maybe ○ No

WHAT SHOULD WE CHANGE?

Would you consider returning?

○ Yes ○ Maybe ○ No

Signed electronically under the Information Technology Act, 2000.

Employee

SIGNATURE

PRINTED NAME

DATE