

Healthcare Staff Exit Interview Form

Full Name

Position/Title

Department/Unit

Supervisor/Manager

Start Date

Last Working Day

Reason for Leaving

If other, please specify

What aspects of your employment did you find most positive?

What aspects of your employment do you feel could have been improved?

How would you rate your relationship with your supervisor/manager?

Did you receive adequate training and development?

Any concerns you'd like to share about your experience?

Suggestions for workplace improvement

Would you consider returning to work here in the future?

Additional Comments