Horry-Georgetown Technical College Exit Questionnaire

Employee Name: __________________________________________________

When you were first employed by Horry-Georgetown Technical College were the duties and responsibilities of your job clearly explained to you? _____Yes _____No

Comments: ___________________________________________________________________________________

_____________________________________________________________________________________

Which of the following factors contributed toward your decision to leave?

( ) Commuting distance
( ) Illness in family
( ) Family problems
( ) Maternity
( ) Marriage
( ) Return to school
( ) Health reasons
( ) Military reasons
( ) Transportation problems
( ) Personal reasons
( ) To take care of children or housekeeping
( ) Inadequate training

( ) Working conditions
( ) Type of work
( ) Promotional opportunity
( ) Compensation
( ) Hours
( ) Supervision
( ) Fellow employees
( ) State policies
( ) Mutual agreement
( ) Location

Other ______________________________

If you have accepted another position, will you be performing the same type of work? _____Yes _____No

Does your new position offer you:

Better future Yes No Less strenuous work Yes No
Better hours Yes No Return to former trade Yes No
Higher salary Yes No Other (specify): ______________________________

What did you like most about your job and/or department?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

What did you like least?

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________
Was the amount of work you were expected to do:
( ) Too much for one person.
( ) Occasionally heavy, but sufficient most of the time.
( ) Just right; not under-worked or overworked.
( ) Not enough; did not fully take up time.

How would you rate the College on each of the following points:

<table>
<thead>
<tr>
<th></th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>No Opinion</th>
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</thead>
<tbody>
<tr>
<td>Fair and equal treatment by management</td>
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<tr>
<td>Provides recognition on the job</td>
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<td>Development of cooperation and team work</td>
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<tr>
<td>Resolving complaints and problems</td>
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<tr>
<td>Communications with employees</td>
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<tr>
<td>Communications within your department</td>
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<td>On-the-job training</td>
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<td>Rate of pay for your job</td>
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<td>Employee benefits</td>
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<td>Chance of advancement</td>
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<td>Access to information needed to do your job</td>
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<td>Management responsive to your ideas</td>
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<td>Other (specify):</td>
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<td>Other (specify):</td>
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</table>

Did you receive a current job description for your position when you were employed? _____Yes _____No

Please rate your immediate supervisor on each of the following points:

<table>
<thead>
<tr>
<th></th>
<th>Almost Always</th>
<th>Usually</th>
<th>Sometimes</th>
<th>Never</th>
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<tbody>
<tr>
<td>Follows policies and practices</td>
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<td>Demonstrates fair and equal treatment</td>
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<td>Provides recognition on the job</td>
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<td>Communicates well with subordinates</td>
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<td>Develops cooperation</td>
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<td>Resolves complaints, grievance and problems</td>
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Are you leaving for any reason that would appear to be discriminatory on the basis of race, color, sex, religion, national origin, age, handicap or Vietnam Era Veteran? _____Yes _____No

What suggestions would you make for improving the following? Working conditions; employee relations; supervisor of the office; productivity; efficiency:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Employee’s Signature ____________________ Date _________________