

Employee Exit Interview

To Use When You Will No Longer Be Working As An Employee For This Client/Family

1. Personnel Data

Employee Name: _____

Managing Party (POA): _____

Service Recipient: _____

Last Date of Work: _____

2. Reason for Leaving

Terminated (fired)

State Reason: _____

Please attach any additional documentation.

Resigned (quit, voluntarily resigned)

State Reason: _____

Please attach any additional documentation.

Leave of Absence

State reason and date returning to work: _____

Please attach any additional documentation.

Other (example: Lay-off due to over-utilization or services/MA suspended, other employment, sick leave)

State reason and date returning to work if applicable: _____

Please attach any additional documentation.

Did you give the employer notice in advance that you were going to be leaving the position? Yes No

Date you submitted the written notice: _____

What date did you give as a last date of work? _____

Are you being allowed to continue to work until that date? Yes No

If no, explain why not?: _____

Do you ever plan to work for this client/family again? Yes No

Do you have any additional documentation that support your answers/comments?

Yes No

If yes, please describe and mail, fax or email them to Kyla@yourfse.com, toll free fax: 1-888-400-3238, or mail to:

PO Box 6128
Saint Cloud, MN 56302

Whenever possible, please try to obtain both signatures below before sending to Human Resources.

Employee

Date

Common Law Employer (Service Recipient/Managing Party)

Date