



**Human Resources**  
282 Champions Way  
PO Box 3062410  
Tallahassee, FL 32306-2410  
Phone: 850-644-6475  
Fax: 850-645-9507

## Florida State University Exit Survey

Your responses will assist in making Florida State University a better place to work.

Division:   \_\_\_ Academic Affairs                           \_\_\_ Student Affairs                           \_\_\_ University Advancement  
              \_\_\_ Finance and Administration       \_\_\_ Office of Research  
              \_\_\_ University Relations               \_\_\_ Central Administration

What was your University Pay Plan?

Executive Service      A&P                   USPS                   OPS  
                                                                 

Department (Optional): \_\_\_\_\_

1. What was your primary reason for leaving FSU? **(Choose only one option from the list below)**

- To Accept Other Employment  
(Please specify your primary reason for accepting other employment. Choose only one.)
  - Promotion/Career Advancement
  - Higher Pay
  - Work Schedule
  - Career Change
  - Better Working Conditions/Work Environment
  - More Job Security
  - Other \_\_\_\_\_
- Moving
- Layoff
- Educational pursuits
- Illness/Disability
- Personal/Family
- Retirement
- Contract Ending
- Terminated
- Other \_\_\_\_\_

2. For what type of employer will you now be working?  
**(Choose one option from the list below)**

- Internal transfer
- Government agency
- Another University
- Private industry
- Self-employed
- Exiting the workforce
- Other \_\_\_\_\_

3. Please evaluate the following factors as they relate to the working relationship with your supervisor:

|                                             | Excellent                | Satisfactory             | Poor                     |
|---------------------------------------------|--------------------------|--------------------------|--------------------------|
| Fair and impartial treatment                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recognition of accomplishments              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Encouraging cooperation and teamwork        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Effective Communication                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Interest taken in your progress             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Amount/effectiveness of assistance received | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Advocate for your development               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

4. Please evaluate the following based upon your experiences while working at FSU:

|                                         | Excellent                | Satisfactory             | Poor                     |
|-----------------------------------------|--------------------------|--------------------------|--------------------------|
| Salary                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Job security                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Opportunity for career advancement      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Opportunity for educational advancement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Working conditions in your department   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Challenge of work                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Volume of work                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Job development training opportunities  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self development training opportunities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication/Newsletters               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Retirement Benefits                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Health Benefits                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

5. Would you consider returning to work in:

|                                            | Yes                      | No                       |
|--------------------------------------------|--------------------------|--------------------------|
| a. Your same position                      | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Another position in the same department | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Another position at FSU                 | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Same supervisor                         | <input type="checkbox"/> | <input type="checkbox"/> |

6. Please add or note any suggestions/comments, which you feel would make FSU a better place to work.

**OPTIONAL**

Please answer the following questions about yourself. To the extent the law permits, your responses will be kept confidential.

**Name** \_\_\_\_\_ **Gender** \_\_\_\_\_ **Race** \_\_\_\_\_

**Age**

Under 25yrs   26-35yrs   36-45yrs   46-55yrs   56-65yrs   Over 65yrs  
              

**Annual Salary** \_\_\_\_\_ **Years of Service at FSU** \_\_\_\_\_