



Cottonwood County

Exit Interview Questionnaire

Note: Exit Interviews are voluntary upon termination from employment with Cottonwood County. If you choose to take part in the exit interview process, you may choose to have it conducted by your Department Head, Immediate Supervisor, or a Commissioner of the County Board.

Data resulting from this exit interview shall be regarded as Private Data unless a statutory or federal law specify otherwise. Regarding this exit interview:

- a) The purpose and intended use of the data resulting from this exit interview shall be to determine whether there might be factors within the control of management which might be or could have been addressed which might have diminished the likelihood of the exit of this interviewee, as well as that of present or future employees.
- b) The interviewee's participation in this interview must be voluntary.
- c) There is no known consequence to the interviewee for either supplying or refusing to supply the requested data.
- d) The recipients of this information shall be limited to managerial positions of Cottonwood County, including the County Board.

1. In what department were you last employed? _____

2. a. What was your job? _____

b. Employment status: Part-time _____ Full-time _____

3. How long have you worked for the county? _____ years

4. How long have you worked in your present position? _____ years

5. Was the decision to leave your position influenced by any of the following
(please check all that apply)?

Better Job Opportunity	<input type="checkbox"/>
Type of Work	<input type="checkbox"/>
Rate of Pay	<input type="checkbox"/>
Commuting Distance	<input type="checkbox"/>
Supervision	<input type="checkbox"/>

Family Circumstances	<input type="checkbox"/>
Self-employment	<input type="checkbox"/>
Illness or physical condition	<input type="checkbox"/>
Return to school	<input type="checkbox"/>
Other	<input type="checkbox"/>

Would you please specify? _____

6. If you went to another job, are you doing the same type of work? Yes _____ No _____

If no, what type of work is it? _____

7. What does the new job have to offer that your job with Cottonwood County did not? _____

8. What do you think of supervision within your unit on the following points:

	Almost Always	Usually	Some times	Never
Follows policies & practices				
Demonstrates fair & equal treatment				
Provides recognition on the job				
Develops cooperation				
Resolves complaints, grievances & problems				

Comments _____

9. How would you rate the following in your department/unit?

	Excellent	Good	Fair	Poor
Cooperation within the department				
Cooperation with other departments				
On-the-job training				
Equipment provided				

Comments _____

	<u>Excellent</u>	<u>Good</u>	<u>Fair</u>	<u>Poor</u>	<u>No opinion</u>	<u>Did not know it existed</u>
Paid sick leave	<input type="checkbox"/>					
PERA	<input type="checkbox"/>					
Deferred compensation	<input type="checkbox"/>					
Health insurance	<input type="checkbox"/>					
Life Insurance	<input type="checkbox"/>					
Employee Assistance Plan	<input type="checkbox"/>					

16. What did you like most about working for Cottonwood County? _____

And what did you like the least? _____

17. Would you recommend Cottonwood County to a friend as a place to work?

- Yes, definitely Yes, with reservations No

18. Do you feel certain employees were treated with favoritism over others? Yes No

If yes, why? _____

If no, why? _____

19. Additional comments about your job, department, personnel policies, union contract or the county:

20. Do you recommend any changes to the job description? _____

Thank you for taking the time to answer our questionnaire.

Signature of employee _____ Date _____

Signature of person conducting interview _____

Signature of Department Head who reviewed exit interview form _____

NOTE:

The County Board does not routinely review these exit interviews. However, if you are requesting that the County Board specifically review this interview, please check here: _____

Please return this form to your current Department Head or Commissioner Liaison upon completion.

Appendix A

Employee Separation Checklist

Name: _____

Items to turn in, if applicable:

_____ Employee Separation Questionnaire (employees option)

_____ Key(s) – Building/Office

_____ County Identification Card (picture ID)

_____ Gas Card

_____ Equipment (Laptops, Cellular Phones, Pagers, Radios, Etc.)

_____ Computer passwords

_____ Telephone Credit Card

_____ Any other county equipment associated with your particular department

Appendix B

Family Service Agency Employees Only

Position: _____

Date started with Agency: _____

Date left Agency: _____

Total of vacation time paid for: _____

Balance of sick leave time: _____ Paid for: _____

Minnesota Mutual Life Continue/Decline: _____

Blue Cross/Blue Shield Notice to Terminate Employee: _____

Merit System DHS 852 completed and signed: _____

Merit System DHS 858 completed and signed: _____

PERA Benefits (Action taken): _____

EQUAL EMPLOYMENT OPPORTUNITY

It is the policy of Cottonwood County to provide equal employment opportunity for all, without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation, or age.

DATA PRIVACY NOTICE

The information requested on this application is intended to be used by Cottonwood County in determining suitability for employment for the position, which you are currently seeking or may seek in the future. You are not legally required to provide any of the information on this form at this time. However, failure to provide complete, accurate information may result in the County being unable or unwilling to offer employment to you. With respect to any special accommodations necessary for completing your application or the interview process, the County may be unable to provide the necessary accommodations if you do not provide the personal information requested. The information on this application, which is classified as private data under the Minnesota Government Data Practices Act will not be released outside the County without your consent except as necessary for tax purposes or as otherwise required by state or federal law.

Tennesen Warning

Private data is information, which is available to you, but not the public; the personal information we collect about you is private. Minnesota Statutes 130.04 and 13.43 are two sections that govern what affects you as an applicant for employment. All data collected is considered private except for the following:

1. Your veteran's status
2. Relevant test scores
3. Your rank on our eligibility list
4. Your job history
5. Your education and training
6. Your work availability

Your name is considered private information; however, if you are selected, to be interviewed as a finalist, your name becomes public information.

The data supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel policies, rules and regulations.

Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability data is voluntary, but refusal to supply other requested information, will mean that your application for employment may not be considered.

Private data is available only to you, appropriate county employees and others as provided by state and federal law, who have a bonafide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment, which is not designated in this notice as private data.

Except for race, sex, age and disability data, the information you give us about yourself is needed to identify you and in determining your suitability for the position for which you are applying. Race, sex, age and disability data are used in summary form to monitor protected class employment and to meet federal, state and local reporting requirements.

I declare that I have read and understand the information given above regarding the Minnesota Data Practices Act.

Applicant's Printed Name

Applicant's Signature

Date