

**GEORGIA DEPARTMENT OF CORRECTIONS**  
**EXIT QUESTIONNAIRE**

Date \_\_\_\_\_  
 Job Title \_\_\_\_\_ Name (optional) \_\_\_\_\_

Work Location \_\_\_\_\_ Years/months in Current Job \_\_\_\_\_ Years/months with GDCorrections \_\_\_\_\_

Age (Optional):  Under 25  25-29  30-34  35-39  40-44  45-49  50-54  55 or over.

Gender (Optional):  Male  Female

Ethnicity (Optional):  African-American  Asian-Pacific Islander  Native American  Caucasian  Other

Education (Please check one):  High School/GED  Technical School  Some College, no degree  
 Bachelors Degree  Masters Degree  PhD, MD, JD, DDS, DDM, etc.  Associates Degree

Previous Experience (**Please check one**):  Military  Other State Job  Other Corrections (Local,Federal,etc.)  
 Law Enforcement (Not Corrections)  Other (None of the above)

Type of Termination (**Please check one**):  Retirement  Transfer within Department  Other Transfer (State Job)  
 Resignation  Termination

Reason for Leaving (**Please check one**):  Change of Residence  Another Job  Attend School  Military  
 Leaving Workforce  Health  Family Matters  Other

If leaving for Another Job, please check the box for the type of job:  Other Correctional Agency  
 Law Enforcement (Not in Corrections)  Other Public Sector Job  Other Private Sector Job  Own Business

Please check **all** that apply to your new job:  
 Higher Pay (less than 10 % higher)  Higher Pay (10% or higher)  Better Working Conditions  
 Better Opportunities for Advancement  Closer to Home  Less Overtime  Better or More Regular Hours  
 More in Line with Education/Experience

Please answer the following questions about your experience working with the Georgia Department of Corrections:

|   | Always                   | Frequently               | Sometimes                | Seldom                   | Never                    |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Workload was too heavy.....                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Workload was too light.....                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Work was challenging.....                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Work was boring.....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Work was exciting.....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Work was frustrating.....                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I received adequate training for my job.....                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| My supervisor gave me clear instructions.....                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I understood what I was expected to do.....                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| When I had questions, I was able to get timely answers.....     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Management kept me informed about changes affecting me....      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| My supervisor handled work problems satisfactorily.....         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Performance Management Forms were explained to me.....          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Performance Management Forms were fair and helpful.....         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I felt any complaints I had were handled satisfactorily.....    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety precautions were followed at my work site.....           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I felt safe at work.....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I understood policies and procedures I was expected to follow.. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

My coworkers and I worked well together.....

My supervisor was fair and objective.....

My supervisor was willing to listen.....

My supervisor asked for my input on things that affected me...

Please check the items that you considered to be the **best things** about your experience with the Georgia Department of Corrections (choose all that apply):

|   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Work location        | <input type="checkbox"/> Availability of paid leave     | <input type="checkbox"/> Retirement benefits | <input type="checkbox"/> Health insurance |
| <input type="checkbox"/> Co-workers           | <input type="checkbox"/> Promotional opportunities      | <input type="checkbox"/> Type of work        | <input type="checkbox"/> Training         |
| <input type="checkbox"/> Supervision received | <input type="checkbox"/> Doing worthwhile work          | <input type="checkbox"/> Work environment    | <input type="checkbox"/> Work challenge   |
| <input type="checkbox"/> Job security         | <input type="checkbox"/> Feeling rewarded for my effort | <input type="checkbox"/> Work variety        | <input type="checkbox"/> Chance to learn  |
| <input type="checkbox"/> Career growth        | <input type="checkbox"/> Being in Law Enforcement       | <input type="checkbox"/> Work schedule       | <input type="checkbox"/> Fair treatment   |
| <input type="checkbox"/> Entry salary         | <input type="checkbox"/> Frequency of pay increases     | <input type="checkbox"/> Being part of team  | <input type="checkbox"/> Other _____      |

Please check the items that you considered to be the **worst things** about your experience with the Georgia Department of Corrections (Choose all that apply):

|   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Work location        | <input type="checkbox"/> Availability of paid leave     | <input type="checkbox"/> Retirement benefits | <input type="checkbox"/> Health insurance |
| <input type="checkbox"/> Co-workers           | <input type="checkbox"/> Promotional opportunities      | <input type="checkbox"/> Type of work        | <input type="checkbox"/> Training         |
| <input type="checkbox"/> Supervision received | <input type="checkbox"/> Doing worthwhile work          | <input type="checkbox"/> Work environment    | <input type="checkbox"/> Work challenge   |
| <input type="checkbox"/> Job security         | <input type="checkbox"/> Feeling rewarded for my effort | <input type="checkbox"/> Work variety        | <input type="checkbox"/> Chance to learn  |
| <input type="checkbox"/> Career growth        | <input type="checkbox"/> Being in Law Enforcement       | <input type="checkbox"/> Work schedule       | <input type="checkbox"/> Fair treatment   |
| <input type="checkbox"/> Entry salary         | <input type="checkbox"/> Frequency of pay increases     | <input type="checkbox"/> Being part of team  | <input type="checkbox"/> Other _____      |

What were the things that **most influenced** to your decision to end your employment with the Department of Corrections? (Please check all that apply.)

|   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> Poor working conditions                                      | <input type="checkbox"/> Lack of training opportunities  | <input type="checkbox"/> Too far from home       | <input type="checkbox"/> Poor benefits    |
| <input type="checkbox"/> Bad work schedule  | <input type="checkbox"/> Problem with childcare          | <input type="checkbox"/> Family problems         | <input type="checkbox"/> Work stress      |
| <input type="checkbox"/> Work too dangerous   | <input type="checkbox"/> Lack of promotion opportunities | <input type="checkbox"/> Poor work hours/shifts  | <input type="checkbox"/> Burnout          |
| <input type="checkbox"/> Lack of career growth  | <input type="checkbox"/> Too long between pay increases  | <input type="checkbox"/> Pay increases too small | <input type="checkbox"/> Moved away       |
| <input type="checkbox"/> Wanted to go to school                                       | <input type="checkbox"/> Change in family situation      | <input type="checkbox"/> Too much overtime       | <input type="checkbox"/> Low pay          |
| <input type="checkbox"/> Unfriendly co-workers  | <input type="checkbox"/> Health reasons                  | <input type="checkbox"/> Joining military        | <input type="checkbox"/> Poor supervision |
| <input type="checkbox"/> Disliked type of work  | <input type="checkbox"/> Work different from expected    | <input type="checkbox"/> Heavy workload          | <input type="checkbox"/> Better job offer |
| <input type="checkbox"/> Unlawful harassment or discrimination (please explain) _____ |  |  |   |

Other (please explain) \_\_\_\_\_

| Please rate the following items: | Poor                     | Fair                     | Average                  | Good                     | Excellent                |
|----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Entry salary                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Orientation to my job            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pay relative to work effort      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| On-the-job-training              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Safety at work site              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Time off                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Working conditions               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Retirement plans                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Health Insurance                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Promotional opportunities        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Would you consider working for the Georgia Department of Corrections again in the future?  Yes  No

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_