

What was your experience like working for the City of Greater Sudbury?

We really want to know.

The City of Greater Sudbury (CGS) is committed to finding ways to make the workplace better. We appreciate the opportunity to receive your honest and objective opinions regarding the conditions of your work environment. One important way to acquire this information is by speaking with departing employees. Our exit interview provides valuable information to assist us in determining your primary reasons for leaving and what we might consequently be able to do as an employer to improve the employment experience for others.

Thank you for your time, your comments are valuable to us.

We wish you the best of luck in your future endeavors!

Consent

All information will be held in confidence and will be combined with other exit interviews and used for statistical summaries in a grouped form, not on an individual basis. Your specific feedback will only be disclosed on an as needed basis in accordance with Section 3.0 of the Exit Interview Policy to your Manager-once-Removed (your immediate Manager's boss) for investigation or action. Please note that disclosure of any breach of CGS Policy (such as Health and Safety, Harassment and Discrimination, Code of Conduct) or any law will be brought to the attention of the Director HR&OD for immediate investigation.

If you wish, you can consent to the disclosure of all of the information you will provide to your Manager-once-Removed. I consent to the release of this information to my Manager-once-Removed for their follow up or future action.

	Yes		No					
					Employee	Signature	•	
EXIT	INTERVIEW:							
Empl	oyee Name:			Employ	/ee #:			
Job T	Title:			 Date Hi	red:			
Busir	ness Unit & Depa	rtment	:	Termin	ation Date:			
Imme	ediate Manager:			Length	of Service:			
Name	e of Interviewer:			Date of	Interview:			

Address: City: Province: Postal Code: Phone: Section A: Reasons for Leaving 1. Please indicate the factors that influenced your decision to leave the City of Greater Sudbury. Please select all that apply. П Better employment opportunity Salary **Benefits** Dissatisfaction with co-workers or management П Work environment (includes working conditions, hours & schedule, workload, degree of independence, etc.) Lack of in-role development (includes training or development in role, responsibilities & П expectations, degree of challenging/rewarding work, etc.) \Box Lack of career development (career planning, promotion opportunities, etc.) \Box Position didn't meet expectations Personal/family Health issues Return to school Relocation Retirement Other (please specify) Other Comments:

FORWARDING ADDRESS (if appropriate)

2.	Have you accepted other employment?
	☐ YES ☐ NO
If Y	ES, what does your new job offer that employment with the City of Greater Sudbury did not offer?
3.	Prior to making your decision to leave CGS, did you discuss the areas of dissatisfaction with your Supervisor/Manager? Did you explore the possibility of a transfer to another Department/Section or discuss your decision with your Supervisor?
	☐ YES ☐ NO
If Y	/ES, which options were explored?
Se	ction B: Working at CGS
1.	How would you rate your overall employment experience with the City of Greater Sudbury?
	☐ My overall employment experience was excellent
	☐ My overall employment experience was good
	☐ My overall employment experience was satisfactory
	☐ My overall employment experience was fair
	☐ My overall employment experience was poor
If y	ou indicated satisfactory, fair or poor, please explain why:
2.	Looking back, were the Organization, opportunities, and your role accurately described to you in the recruiting/employment and on-boarding processes?
	☐ YES ☐ NO

Co	mments:
3.	Did you have a clear understanding of the City of Greater Sudbury's Vision, Mission and Goals and how you and your role could contribute?
	☐ YES ☐ NO
4.	What has been satisfying for you in your time with us?
5.	What has been difficult or frustrating for you in your time with us?
6.	Do you feel you were able to fully leverage your talents in your role?
<u> </u>	
7.	What types of courses or training opportunities would you have liked or needed that you did not get, and what effect would this have had?

		Highly Effective	Somewhat Effective	Poor
Co	ommunication material			
Co	ontent			
Tir	meliness			
omm	ents:			
			L. L	
	d you receive regular and clear feedback on your p portunities?	performance,	behaviors, stre	engths and o
	_			
	YES NO			
□ f NO,	YES			
	please explain:	ger in the foll	owing areas?	
	-	ger in the foll Good	owing areas?	Poor
10. Ple	please explain:		_	Poor
10. Ple	please explain: ease provide feedback regarding your direct mana		_	Poor
I 0. Ple Co Fa	please explain: ease provide feedback regarding your direct mana		_	Poor
I 0. Ple Co Fa Re	please explain: ease provide feedback regarding your direct mana emmunication skills – context, feedback, etc. ir treatment of employees		_	Poor
Co Fa Re En	please explain: ease provide feedback regarding your direct mana emmunication skills – context, feedback, etc. ir treatment of employees esolved complaints and problems promptly		_	Poor
I 0. Pla Co Fa Re Er Ma	please explain: ease provide feedback regarding your direct mana emmunication skills – context, feedback, etc. ir treatment of employees esolved complaints and problems promptly accouraged cooperation		_	Poor
10. Ple Co Fa En Ma Le cre	please explain: ease provide feedback regarding your direct mana emmunication skills – context, feedback, etc. ir treatment of employees esolved complaints and problems promptly accouraged cooperation anagement skills – delegation, support, etc. adership skills – supported change,		_	Poor

Section C: Safety and Wellness in the Workplace

1.	Did you feel that your workplace was secure and free from violence (including threat of violence) and harassment?
	☐ Yes
	☐ Usually (3-4 days per week)
	☐ Sometimes (2-3 days per week)
	Rarely/Never (1 day per week or less)
2.	What do you feel could be done to improve security or risk of violence and harassment in the workplace
3.	If you have ever identified a health or safety concern at CGS, was it addressed or corrected in a timely manner?
	☐ YES ☐ NO
Со	mments:
4.	Did you feel that management visibly demonstrated an interest in the safety of Employees?
	☐ YES ☐ NO
lf N	IO, please explain:
5.	Did you feel that your direct manager/organization enabled you to balance work and personal life?
	☐ YES ☐ NO

lf N	NO, please explain:
6.	Did you feel that your direct manager/organization showed consideration for your wellness?
	☐ YES ☐ NO
<u></u>	omments:
	minents:
Se	ction D: Final Thoughts
1.	Are there any aspects of your job that you would have changed?
2.	What advice would you give your replacement?
3.	Is there anything the City of Greater Sudbury could have done to prevent you from leaving?
	☐ YES ☐ NO
lf \	YES, please explain:

4.	Given the opportunity, would you consider returning to the City of Greater Sudbury for employment	nt?
	☐ YES ☐ NO	
If N	NO, please explain:	
5.	Would you recommend the City of Greater Sudbury as an employer to friends and/or family?	
	☐ YES ☐ NO	
If N	NO, please explain:	
6.	Any other comments or message you would like Senior Management at the City to receive?	
7.	Can you offer any other comments/suggestions on how we can improve and what we can do to b	ecome
	a better organization?	
AD	DDITIONAL COMMENTS/NOTES:	

Employee Signature	Date
Human Resources and Organizational Development Department	Date
	exit Interview questionnaire. I am fully aware that the City of confidentiality of this document that I am requesting once it is
Employee Signature	Date

Thank you for your efforts at the City of Greater Sudbury and your feedback during this conversation.

We wish you every success with your future endeavors.