



# FSU Faculty Exit Survey

Colleges and Units *(Please check one to indicate your primary College/Unit affiliation):*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Arts & Sciences               | <input type="checkbox"/> Jim Moran College of Entrepreneurship | <input type="checkbox"/> NHMFL                     |
| <input type="checkbox"/> Business                      | <input type="checkbox"/> Law                                   | <input type="checkbox"/> LSI                       |
| <input type="checkbox"/> Comm. & Info.                 | <input type="checkbox"/> Medicine                              | <input type="checkbox"/> Academic Quality/External |
| <input type="checkbox"/> Crim. & Crim. Justice         | <input type="checkbox"/> Motion Picture Arts                   | <input type="checkbox"/> Academic Affairs          |
| <input type="checkbox"/> Dedman College of Hospitality | <input type="checkbox"/> Music                                 | <input type="checkbox"/> Finance & Administration  |
| <input type="checkbox"/> Education                     | <input type="checkbox"/> Nursing                               | <input type="checkbox"/> Office of Research        |
| <input type="checkbox"/> Engineering                   | <input type="checkbox"/> Social Sci. & Public Policy           | <input type="checkbox"/> Student Affairs           |
| <input type="checkbox"/> Fine Arts                     | <input type="checkbox"/> Social Work                           | <input type="checkbox"/> President's Office        |
| <input type="checkbox"/> Health & Human Sciences       | <input type="checkbox"/> University Libraries                  | <input type="checkbox"/> University Relations      |
|  | <input type="checkbox"/> University School (FSUS)              |  |

**Department/Unit:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_

1. Why are you leaving FSU? *(Please check all that apply)*

- To Accept Other Employment
- Promotion/Career Advancement
- Higher Pay
- Better Benefits *(Please specify):* \_\_\_\_\_
- Work Schedule
- Career Change
- Better Working Conditions/Work Environment
- More Job Security
- Other *(Please specify):* \_\_\_\_\_

- Other Reasons *(Please check all that apply)*
- Moving
- Layoff
- Educational pursuits
- Illness/Disability
- Personal
- Family *(Please specify):* \_\_\_\_\_
- Retirement
- Contract Ending
- Terminated
- Other *(Please specify):* \_\_\_\_\_

2. Which of these reasons was most influential in your decision to leave FSU? (Please write the reason(s) in this space):

3. For what type of employer will you now be working? (Please choose one option from the list below)

- Government Agency
- Another Academic Institution (Please specify): \_\_\_\_\_
- Private Industry
- Self-employed
- Exiting Workforce
- Other (Please specify): \_\_\_\_\_

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

	Excellent	Satisfactory	Poor
Fair and impartial treatment			
Recognition of accomplishments			
Encouraging Cooperation			
Effective Communication			
Interest taken in your development			
Amount/effectiveness of assistance received			

Do you have any comments on your working relationship with your immediate supervisor?

5. Please evaluate the following factors as they relate to your working relationship with your colleagues:

	Excellent	Satisfactory	Poor
Recognition of accomplishments			
Cooperation and Support			
Effective Communication			
Interest taken in your progress			
Amount/effectiveness of assistance received			
Opportunity to participate in shared governance			
Cooperation from colleagues in departmental service assignments			

Do you have any comments on your working relationship with your colleagues?

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

	<b>Excellent</b>	<b>Satisfactory</b>	<b>Poor</b>
Salary			
Benefits			
Job security			
Opportunity for career advancement			
Opportunity for travel			
Working conditions in your department/unit			
Challenge of work			
Teaching workload			
Research workload			
Service workload			
Communication			

7. Would you consider working for FSU again in the future?                      Yes                      No

a. If you answered “yes”, please specify in what capacity you would return:

	<b>Yes</b>	<b>No</b>
i. Same position		
ii. Another position in the same department		
iii. Another position at FSU		

b. If you answered “no”, please explain:

8. Please add or note any suggestions/comments below.

**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:** \_\_\_\_\_

**Tenured** \_\_\_\_\_ **Tenure Earning** \_\_\_\_\_ **Non-tenure Earning** \_\_\_\_\_

Thank you for participating in the exit survey.

Please send to:

Faculty Exit Survey  
[fda-faculty@fsu.edu](mailto:fda-faculty@fsu.edu)

850-644-5196

Vice President, Office of Faculty Development  
and Advancement