



Research Foundation for Mental Hygiene, Inc.
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Exit Survey

We would like your thoughts, suggestions, and comments on your employment with Research Foundation for Mental Hygiene, Inc. Please take a few moments to answer the following questions. Your thoughtful response to the questions on this form will assist us in strengthening the foundation as a place of employment.

Name _____

Hire Date _____

Termination Date _____

Position _____

Reason for Leaving

1. What additional or different training could be improved to have you more effective in your position?

2. Please comment on the effectiveness of our annual evaluation program and performance feedback you received while employed:

3. Are there any changes to the evaluation program that you feel would be beneficial?

4. Did RFMH's benefit package meet your individual needs?

5. What additional benefit(s) would you have wanted to be offered?

6. What did you like best about RFMH?

7. What did you like least about RFMH?

General Comments:

Thank you for taking the time to answer these questions. Please note that your responses will remain anonymous and used only to identify ways in which we can strengthen the foundation as an employer.