



**STATE OF NEVADA**  
**DEPARTMENT OF ADMINISTRATION**  
*Division of Human Resource Management*  
100 N. Stewart Street, Suite 200 | Carson City, Nevada 89701  
Phone: (775) 684-0150 | [www.hr.nv.gov](http://www.hr.nv.gov) | Fax: (775) 684-0124

**MEMORANDUM**  
**HR#03/14**

January 8, 2014

**TO:** Department Directors  
Division Administrators  
Agency Personnel Liaisons  
Agency Personnel Representatives

**FROM:** Lee-Ann Easton, Administrator *Lee-Ann Easton*  
Division of Human Resource Management

**SUBJECT:** 2014 State of Nevada Employee Exit Survey

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The Division of Human Resource Management believes that employees who choose to leave their jobs can provide valuable feedback to help improve the work environment. Employee turnover can result in negative consequences for State departments and agencies including costs related to increased recruitment, training and indirect impacts such as lost productivity and lower morale. Through our online survey, which users can access via the following link: <https://www.surveymonkey.com/s/DWH6GGC>, the Division of Human Resource Management plans to continue to solicit anonymous comments and responses from employees that have voluntarily left State service or transferred to other State agencies. Results have been provided on a quarterly and annual basis to agencies. Listed below are guidelines to distribute the survey:

- Survey data will be collected entirely through an online survey tool. When employees tender their resignation or provide notice of their intent to move to another agency, the agency should provide the attached memo. The memo includes the online survey address for the employees to access the survey;

- Surveys should be solicited from employees voluntarily leaving State service;
- Surveys should be solicited from employees moving from one State agency to another;
- Survey results will be provided to agency management and human resources staff on a quarterly and annual basis;

If you have any questions regarding the State of Nevada Employee Exit Survey, please contact Christine Ripley at (775) 684-0148 or [cripley@admin.nv.gov](mailto:cripley@admin.nv.gov).

Thank you for your participation and please let us know if you have additional suggestions for improving the Exit Survey.

LE:cr/tp



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**MEMORANDUM**

**TO:** Nevada State Employee

**FROM:** Lee-Ann Easton, Administrator  
Division of Human Resource Management

**SUBJECT:** 2014 CONFIDENTIAL EXIT INTERVIEW SURVEY

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I would like to take a moment to thank you for your service to the State of Nevada. As you are now leaving state employment or moving to another state agency, I am requesting your participation in completing the online [Exit Interview Survey](#). The purpose of this survey is to evaluate the level of satisfaction you experienced while working for the State of Nevada and your agency. The survey asks specific questions both internal to the agency you worked for as well as State employment in general.

Your identity is not linked to your survey responses. Your agency will only receive summary reports that compile responses from all employees leaving the agency.

Survey information will be used by your agency's management to assess the quality of their work environment and identify training needs. The Division of Human Resource Management will use this information to assess the overall satisfaction of employees leaving State service or changing agencies, make recommendations for change when appropriate, and assist departments and agencies with specific challenges in their work environments.

Should you wish to fill out a paper copy of the survey instead, please contact a member of your agency personnel staff or by printing it using the following link [Exit Interview Survey Paper Version](#).

Again, thank you for your service and for helping make the State of Nevada an even better place to work.

LE:cr/tp

## State of Nevada 2014 Employee Exit Interview Survey

**Please provide the following information about the job you held:**

1. Department/agency:
2. Organization/division:
3. Type of service:     Classified     Unclassified     Non-classified     Unsure
4. Which Occupational Group did your position fall within?
  - Agriculture & Conservation     Clerical & Related Services     Domestic Services     Education
  - Engineering, Drafting, Environmental & Land Use Services     Mechanical & Construction Trades
  - Fiscal or Information Management & Staff Services     Administration & Agency Management
  - Social or Rehabilitation Services, Parole & Probation     Medical, Health & Related Services
  - Sworn Law Enforcement Officers     Regulatory & Public Safety     Library & Archives     Unknown

(Answering this question is not mandatory, but the information may be useful in identifying areas of concern)

5. Position Title:
6. City where employed:
7. Years of Service:
8. What did you like most about your job and/or agency?
9. What did you like least about your job and/or agency?

10. How satisfied have you been with the following?

By <u>checking</u> the appropriate boxes, please rate your satisfaction with each of the following for the position you left.	<i>Dissatisfied</i> <i>1</i>	<i>Somewhat Dissatisfied</i> <i>2</i>	<i>Somewhat Satisfied</i> <i>3</i>	<i>Satisfied</i> <i>4</i>	<i>Very Satisfied</i> <i>5</i>
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Communication between management and employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments:					

Cooperation and teamwork of co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments:					

By <u>checking</u> the appropriate boxes, please rate your satisfaction with each of the following for the position you left.	<i>Dissatisfied</i> <i>1</i>	<i>Somewhat Dissatisfied</i> <i>2</i>	<i>Somewhat Satisfied</i> <i>3</i>	<i>Satisfied</i> <i>4</i>	<i>Very Satisfied</i> <i>5</i>
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Overall satisfaction with direct supervisor

Additional Comments:

Overall satisfaction with management

Additional Comments:

Opportunities for advancement

Additional Comments:

Interest and challenge of work

Additional Comments:

Flexibility in work scheduling

Additional Comments:

Opportunities for training and development

Additional Comments:

Opportunities for recognition

Additional Comments:

By <u>checking</u> the appropriate boxes, please rate your satisfaction with each of the following for the position you left.	<i>Dissatisfied</i> 1	<i>Somewhat Dissatisfied</i> 2	<i>Somewhat Satisfied</i> 3	<i>Satisfied</i> 4	<i>Very Satisfied</i> 5
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Compensation       
 Additional Comments:

Health insurance benefits       
 Additional Comments:

Paid leave benefits       
 Additional Comments:

Retirement benefits       
 Additional Comments:

Working conditions       
 Additional Comments:

11. Were your duties and work performance standards clearly defined by your supervisor? YES  NO   
 Additional Comments:

12. Did you know how and where to get the information needed to do your job? YES  NO   
 Additional Comments:

13. Did you have the equipment necessary to do your job? YES  NO   
 Additional Comments:

14. Please indicate which of the following applies to you:

- I am leaving State employment (Please skip Question #19)
- I am moving from one State Agency to another State Agency (Please skip Questions #15 through #17)

15. Why did you leave your job? (Check all that apply)

- Better benefits
- Better job opportunity (private sector)
- Better job opportunity (public sector)
- Commute
- Conflict with Supervisor
- Dissatisfaction with duties
- Family reasons
- Health reasons
- Not challenged
- Other, please specify\_\_\_\_\_
- Pay
- Personal reasons
- Position eliminated
- Position made part-time
- Promotion
- Relocation/Move
- Retirement
- Return to school
- Work relationships

16. If you are leaving State employment would you consider re-employment in State government in the future?

YES  NO  If not, please explain:

17. What recommendations do you have for improving State employment?

18. If you are moving to another State Agency would you consider re-employment in this agency in the future?

YES  NO  If no, please explain:

19. Why did you transfer to another agency? (Check all that apply)

- Better job opportunity
- Commute
- Conflict with Supervisor
- Dissatisfaction with duties
- Health reasons
- Not challenged
- Other, please specify\_\_\_\_\_
- Position made part-time, desired full-time
- Position eliminated
- Promotion
- Relocation/Move
- Work relationships

20. Would you consider re-employment in this Agency in the future?

YES  NO  If not, please explain:

21. What recommendations do you have for improving employment in the Agency in which you worked?

22. Please provide any other information you feel is relevant.

***Thank you for your participation in making the State of Nevada a better place to work!***

Please return survey to your Agency Human Resources Department or send to:

Division of Human Resource Management

c/o Consultation and Accountability Unit

100 N. Stewart Street Suite 200

Carson City, NV 89701