



ALLZONE - EXIT INTERVIEW FORM

Take a moment and complete the following questionnaire. We regret losing an employee and hope that through this questionnaire we can identify areas for improvement and address any situation needing attention. It will serve to enable us in developing policies and practices that reflects the needs of the employees. This form will not become a part of your personnel file and will not affect your rehire status. Your cooperation is appreciated.

Personal Information

Name: X. Amshija

Employment Number: AMSC/AMSV 2363

Mobile No: 9361126414

Gender: Female

Department: Medical billing

Designation: Process Associate

Date of Joining: 20/08/2022
(Day/Month/Year)

Date of Leaving: 31/01/2024
(Day/Month/Year)

Details of Projects Worked: Charge Entry

Proj. 27

Immediate Supervisor Name: Saravanan J

Manager Name: Moosa

1. Why are you leaving the job?

personal Reason

2. What were the most important factors in your deciding to take a new job?
Salary? Benefits? Time off? Something else?

Expecting Salary High.

3. Did your current job meet your expectations?

My Expectation was Salary

4. Did you receive adequate support and training in your job?

good Training and Supporting
always good positive mood.

5. What did you like about your job?

The best opportunity and
achievements. learn something

6. What did you dislike about your job?

Not Dislike

7. What change is required to carry out your job?

Nothing.

8. Did you receive enough training to do the job effectively?

Training Given

9. Did you receive enough support to do your job effectively?

The best Supporting to working.

10. How did you feel about the supervision you received?

I Ability and Flexibility at work

11. What was your working relationship with your manager like?

You are the great manager for having confidence in the teams. Ability to the work Independently.

12. How do you feel about the feedback you received from your manager?

~~The~~ Ability and to the work independently.

13. How would you describe your relationship with your colleagues?

The best colleagues.

14. How would you rate the working environment and do you have any suggestions for improvement?

The great environment. No suggestions.

15. Do you have any suggestions regarding organizational policies and procedures?

Nothing

16. Did you have clear objectives in your job?

Nothing

17. How were these objectives communicated to you?

Communication was good.

18. What is positive about this organization?

The organization was best always
positive Mood .-

19. In what ways can the organization improve?

Developing

20. Would you work for the company in the future?

Definitely

21. Would you recommend this company to any of your friends looking for this job?

Definitely

22. Do you have any questions or comments?

Please Kindly request give Saturday
leave in office.

Signature of the Employee: Y. Arjun

Date: 31/1/24

For HR department use:

S. No	Checklist Items	Yes/No	Date
1	ID card and Access card - Returned	YES	31-JAN-2024
2	Access removed	YES	31-JAN-2024
3	Issued relieving order / experience letter	YES	6-FEB-2024

Date: 6-FEB-2024

Signature: N. Arunachalam

Name of the HR: N. ARUNACHALAM