WHEN LEAVING THE UNIVERSITY

When we are making major changes in our lives, such as moving to another location or changing jobs, it is easy to forget to return University keys and property. Therefore, the university has designed the following checklist to assist employees in clearing their obligations.

WHAT YOU NEED TO DO:

1. Simply take whatever action is needed to make certain that either all items on the list below have been returned or that appropriate action has been taken to clear your obligations to the University.
   - Department equipment and materials have been returned.
   - Keys and ID card have been turned into the Key Shop.
   - Parking citations have been paid.
   - Outstanding payroll obligations have been paid. Contact payroll at extension 2325 for questions.
   - Library/media materials have been returned.
   - Grades have been turned in.
   - Separation/leave without pay options have been discussed with Benefits Office at extension 2488.
   - Travel obligations have been met.
   - Telephone Services has been notified of separation (ext. 2247).

2. When the checklist is complete, please contact the Payroll Office at extension 2325. They will verify that all obligations have been met and arrange for your final paycheck to be issued. Please also be sure to provide a forwarding address.
EXIT SURVEY

INSTRUCTIONS: Please complete and return this survey to the Division of Human Resources Office, 314 Showalter Hall

Department:

**Job**

Did you feel you were under or over-qualified for your position, based on your training and experience?

________________________________________________________________________

________________________________________________________________________

Did you feel your job was important to your area or the institution?

________________________________________________________________________

________________________________________________________________________

Did you feel your position met your expectations? If not, why?

________________________________________________________________________

________________________________________________________________________

Did you feel you were making progress in your position?

________________________________________________________________________

________________________________________________________________________

Did you like your work environment (hours, space, equipment, etc.)?

________________________________________________________________________

________________________________________________________________________

Did you feel there was opportunity for advancement?

________________________________________________________________________

________________________________________________________________________

Did you feel secure in your job?

________________________________________________________________________

________________________________________________________________________
**Benefits/Salary**

Did you feel you received an adequate orientation for your position?


Did you feel your salary was adequate for your position?


Did you feel the fringe benefits were adequate? If not, why?


Did you feel the leave benefits and allowances were fair?


**Relationship with Supervisor**

Did you feel your supervisor was fair and consistent in use of his/her authority?


Did you feel the line of communication was good between your supervisor and yourself? If not, why?


Did you play any part in decision-making?


Did you feel the supervisor took an interest in your welfare and progress?

________________________________________________________________________

Relationship with Work Group

Did you feel you had a good working relationship with your co-workers?

________________________________________________________________________

Organization as a Whole

Please rate the institution as to how it was as a place to work (10 being the best).

1 2 3 4 5 6 7 8 9 10

Additional Comments

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Welcome to the Eastern Washington University Exit Survey. This voluntary survey is our report card designed to obtain feedback and help us assess our compliance to civil rights standards and improve the work environment at EWU. If provided, your name will not be disclosed unless you consent. The Equal Opportunity Director will review and summarize your feedback for an annual report to the University’s management. If there is a particular item you do not feel comfortable answering please leave it blank and continue to the next question.

EWU Position:  
- [ ] Faculty  
- [ ] Staff  
- [ ] Administrator  
- [ ] Student Employee

1. How would you describe the human relations environment of your former workplace?  
- [ ] Very Supportive  
- [ ] Supportive  
- [ ] Non-Supportive  
- [ ] Hostile

2. Unlawful discrimination may be defined as, “Not receiving equal access to opportunities based on characteristics such as race, religion, sex, national origin, disability, marital status, and or sexual orientation.” Have you experienced unlawful discrimination while working at EWU?  
- [ ] Yes/Reported  
- [ ] Yes/Not Reported  
- [ ] No

   a. Describe the discrimination

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

3. Sexual harassment is a form of sex discrimination that includes, “Unwanted advances, requests for sexual favors and or other conduct of a sexual nature.” Were you ever sexually harassed while employed by EWU?  
- [ ] Yes/Reported  
- [ ] Yes/Not Reported  
- [ ] No - please go to question five.

4. Were you sexually harassed by  
- [ ] a colleague?  
- [ ] a student?  
- [ ] a supervisor?  
- [ ] contractor or visitor?

   a. Describe the sexual harassment

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

5. Did discrimination or a sexual harassment influence your decision to leave EWU?  
- [ ] Yes (place comments in 2a. or 4a.)  
- [ ] No

6. How could EWU best enhance the human relations environment?

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

7. Were there adequate advancement/promotional opportunities for you?  
- [ ] Yes  
- [ ] No

8. What could the University have done to retain you as an employee?

   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________

9. If asked, would you work for EWU again?  
- [ ] Yes  
- [ ] No

10. Would you like a more detailed interview relating to your responses?  
- [ ] Yes  
- [ ] No

__________________________   (        ) _________________    ___________________@_____________._____
NAME:   PHONE    EMAIL

I do [ ] do not [ ] consent to the disclosure of my name.

Return this completed form to: EEO/AA, SHOWALTER 214.
TO: Separating employees who receive pay by electronic funds transfer (EFT)

FROM: Payroll Office

SUBJECT: Distribution of final paycheck and leave cash out (if applicable)

Under state law, your payment for the last pay period you work (and any applicable leave cash out) will be made by physical check. The check(s) will be mailed to the address that currently appears on your advice of deposit.

If you need to update or change your address, please complete the information below and deliver or email (jmorgan@mail.ewu.edu or gmontgomery@mail.ewu.edu) or mail to the Payroll office at 322 Showalter Hall. If you mail this form please address it to:

EWU Payroll
319 Showalter Hall
Cheney, WA 99004-2445.

New Address Information:

Name: ____________________________________________________________

Address: _________________________________________________________

City/State/Zip: ____________________________________________________

Signature ________________________________________________________

Printed Name ____________________________________________________

Social Security Number ____________________________________________

Return this form to the Payroll Office at the address listed above.