POST OFFICE BOX 32000 · 1961 MIDWAY STREET · SHREVEPORT, LOUISIANA 71130-2000 AREA CODE 318 · Telephone 603-6300 · Fax 631-5241

Theodis Lamar Goree, Ph.D. Superintendent

Caddo Parish Public Schools considers our students and employees our most valuable resources. As a result, the school district is committed to identifying and implementing strategies that will allow for the retention of a highly competent workforce. The use of Exit Interviews as a tool for gathering information regarding the experience of employees leaving the district is critical in the development and implementation of recruitment and retention strategies. In order to facilitate the collection of information, the Caddo Parish Public School district has developed an exit interview form and process to be used by all district/school employees.

Thank you for your service to the District. Exit interview data from all departing employees is combined and presented to senior management in a summary report.

We appreciate your willingness to participate in the exit interview process.

Sincerely,

Leisa Woolfolk Chief Human Resource Officer



Employee Separation Checklist

The purpose of this checklist is to assist CPPS employees and departments with an exit process when an employee separates employment with the district. Employees leaving the district must be aware of pertinent information, rights and benefits that may affect them at separation. The employee and responsible department must complete below tasks and sign where appropriate prior to separation.

Employee Name (Please Print)		Social Security Number	Last Working Day				
Department / School Name		Position					
_	Tasks 1-3 are completed by Employee FIRST and form submitted to Human Resources for Tasks 4-7.						
En	nployee Tasks			Completed (confirmed by HR)			
1	Employee either: Submits Resignation Form (see page Completes retirement packet - contact Retirement Department Departm	·	rtment OR				
2	Employee completes Employee Exit Interview Questionnaire https://www.surveymonkey.com/r/CaddoExitQuestionnaire						
3	Return all CPPS property to the School/Department Keys Laptop Tablet Radio Other:	☐ School ID Badge					
	□ Property not returned:						
	All CPPS property returned to:						
Employee Benefits: Provided you've made the necessary contributions, your group health plan and other insurance benefits will continue until the last day of the month in which termination occurs. If you have completed your contract year, your benefits will end the last day in the month of your contract. You will receive a COBRA notice allowing you the opportunity to continue your group health and dental insurance benefit coverage after the end of the month of your termination. Please contact Employee Benefits at 318-603-6388 if you have any questions.							
Hu	man Resources Task			Completed (confirmed by HR)			
4	Notify Employees' Supervisor with Exit Packet						
5	Update Permanent / Mailing Address via Sunguard						
6	Notify Payroll Services that final paycheck may be mailed.						
7	Notify Security and Insurance of effective separation date.						
*NOTE: I UNDERSTAND THAT FAILURE TO RETURN ALL CPPS PROPERTY AND SUBMIT THIS FORM TO HUMAN RESOURCES PRIOR TO MY SEPARATION FROM THE DISTRICT, MAY RESULT IN A DELAY IN THE PROCESSING OF MY FINAL PAYCHECK.							
	EMPLOYEE SIGNATI	IRE		DATE			



Caddo Resignation Form

I hereby resign my position w	ith the Caddo Parish School Sy	stem as described	below:	
Name				
Position				
Location	E	Effective Date		
****PLEASE NOT	E THAT THE RESIGNATION D	DATE CANNOT BE	(Last working date) ERETROACTIVE****	
Reason for resignation				
My Current Mailing Address				
	S	Street Address (PO Box)		
	City, State		ZIP	
	Email Address (other than	CPSB Account):		
My Future Mailing Address _		Street Address (PO	Box)	
	Street Address (PO Box)			
	City, State		ZIP	
	estionnaire: <u>https://www.survey</u> l: <u>https://www.trsl.org/uploads/F</u>		doExitQuestionnaire	
	EMPLOYEE SIGNATURE		DATE	

Employee Benefits: Provided you've made the necessary contributions, your group health plan and other insurance benefits will continue until the last day of the month in which termination occurs. If you have completed your contract year, your benefits will end the last day in the month of your contract. You will receive a COBRA notice allowing you the opportunity to continue your group health and dental insurance benefit coverage after the end of the month of your termination. Please contact Employee Benefits at 318-603-6388 if you have any questions.