



Exit Interview Form for Graduating Students

Please PRINT clearly. Answer all questions. When complete and **signed**, please deliver this Exit Interview to your Campus Registrar's office by mail, fax, scanned email, or in person. All answers are kept confidential and will in no way reflect negatively on the person completing this form.

1. Name: _____ Student ID # _____ DOB: _____
MM/DD/YYYY

2. Address: _____

3. Phone: _____ Email address: _____

4. Last Schiller Campus attended: _____ Major: _____ Degree: _____
AA, AS, BA, BBA, BS, MA, MS, MBA

5. Country of Citizenship? _____ 6. Graduation date: Spring 2009 Summer 2009 Fall 2008

7. Are you continuing your education? **Yes** or **No** 8. If **yes**, where? Schiller or other

9. Name of the institution: _____ 10. What degree are you seeking: _____

11. Address of the Institution: _____

12. Are you currently working or do you have a position lined up? **Yes** or **No**

13. If **no** on #12 please go to #15. If yes, provide the following:

Name of Employer: Address of Employer:

Telephone: Your Job Title:

14. Is your current position
(Check the appropriate box) in your field of study, in a related field, in a field NOT related to your studies?

15. If you do not have a job, are you actively seeking employment? **Yes** or **No** (If **yes**, go to #16, if **no**, go to #17)

16. If **yes** to #15, did you contact Career Planning department at Schiller? **Yes** or **No**

17. Was the Career Planning department helpful in the following:

Resume Cover letter Interviewing Skills Job search Placement Other: _____

18. If **no** to #15, what are your plans for the immediate future? (check one)

Education Military Family Health Issues Other: _____

19. How would you rate the usefulness of your educational preparation at Schiller for your career plans? (Check appropriate box.)

Not Helpful Somewhat Helpful Helpful Very Helpful

20. Which aspects of your Schiller education were most important and most useful in preparing you for your career plans? (Check all appropriate boxes.)

International Experience

Curriculum

Multilingualism

Career Planning Department

Internship

Other: _____

21. In your opinion, which areas of your educational program at Schiller were particularly strong?

22. In your opinion, which areas of your educational program at Schiller could be improved, if any?

23. Would you be interested in participating in an alumni organization in? **Yes** or **No**

24. May we use your name and address for prospective student referrals? **Yes** or **No**

Signature: _____ Date: _____