

Vendor Exit Interview Evaluation Form

Vendor Name: _____

Contact Person: _____

Date of Exit: _____

1. Reasons for Leaving

Please provide the main reasons for the decision to cease the partnership:

2. Overall Experience

Rate your overall experience with our organization:

1 - Poor 2 - Fair 3 - Good 4 - Very Good 5 - Excellent

3. Feedback on Communication

How would you rate the communication between our organizations?

1 - Poor 2 - Fair 3 - Good 4 - Very Good 5 - Excellent

4. Suggestions for Improvement

Please provide any suggestions for improvement:

5. Additional Comments

Any additional comments you would like to provide:

Submit