

EOHS Exit Interview Form

Name _____ Advisor _____

Permanent Address: _____

Permanent Phone Contact: _____

SPH Degree Earned: _____ Matriculation Date: _____

Graduation Term _____

Number of Credit Hours Completed for Degree: _____ Part-Time Full Time

Did you receive financial assistance from EOHS (RA, TA, Traineeship, etc)? If yes, please state what type and for how long? _____

If yes, did you receive an office during your time here? Yes No

If you answer yes please return the office keys to Margit Javor in room 414

EMPLOYMENT

Which of the following best describes the setting of your primary employment position? upon graduation?

- | | |
|---|----|
| None, not employed | 01 |
| Self-employed or in private practice | 02 |
| Government agency or institution | 03 |
| Nongovernmental nonprofit agency or institution | 04 |
| Commercial business, agency or institution..... | 05 |
| College or university | 06 |
| Other (please specify) _____ | 07 |

Business **Name** & **Address**:

Business Phone Contact: _____

What is or will be your primary position with this employer?

- | | | |
|----------------------------|--|------------------------------------|
| 01 Administrator/Manager | 07 Environmental technician/sanitarian | 13 Physical therapist |
| 02 Biostatistician | 08 Epidemiologist | 14 Physician |
| 03 Community health worker | 09 Health educator | 15 Professor |
| 04 Dentist | 10 Health information specialist | 16 Registered nurse |
| 05 Environmental engineer | 11 Health planner | 17 Research fellow |
| 06 Environmental scientist | 12 Nurse practitioner | 18 Teach in primary or high school |
| | | 19 Other (please specify) |

Is this position full-time or part-time? Part-Time Full Time

To what extent does this position make use of the training you received at SPH?

Not at all

Very Much

Don't Know

1

2

3

4

5

6

EDUCATION EXPERIENCE

General comments regarding what you gained from the program. Did you get what you wanted/expected? Did you attain the skills you need?

Most helpful courses: _____

Least helpful courses (why) _____

Comment on the social/academic environment for students at SPH and EOHS (i.e. study groups, social event, Chat sessions, presentations, etc.).

Comments on Quality of Advising: (If you submitted the student evaluation of academic/research advising form, you may skip this section.)

Comments on EOHS (include how to improve EOHS):

Comments on Administrative and Support Staff:

Comments on Office of the Dean, Reference Center, SPH Administration and Staff:

Comments on SPH and UIC (include comments on how to improve the School and how it compares with other programs). _____

Concerns, Problems, Suggestions _____
