

TEACHER RETIREMENT SYSTEM OF TEXAS
1000 Red River Street
Austin, TX 78701-2698
512.542.6400 or 1.800.223.8778
www.trs.state.tx.us

Under Texas law, certain designated employees of the College are required to participate in the Teacher Retirement System of Texas (TRS) as a condition of employment. Employees who work at least 20 hours per week for a period of time not less than 4.5 months (or one semester), and who are not eligible for the Optional Retirement Program (ORP), must participate in the TRS program.

The TRS (Teacher Retirement System) retirement benefit plan is a defined benefit plan. This means that the amount of the retirement benefit you receive is determined under a formula established by law. State law also establishes membership eligibility requirements. For an individual who begins employment on, or after, September 1, 2005, with an employer that is a TRS reporting entity; and who is not a member of the TRS as of the date of employment, eligibility for TRS pension plan membership begins on the hire date, and payroll deductions begin with the first pay period processed after the hire date.

Membership contribution rate is currently 7.7% of annual eligible compensation. Membership contributions are tax sheltered; federal tax rules apply when benefits or your accumulated contributions are disbursed. The state currently contributes 6.8% of the aggregate compensation of all TRS members during the fiscal year.

Alvin Community College payroll will report your eligibility status to TRS. The enrollment information collected on this form is for Alvin Community College Human Resources file documentation only. Official documents / information will be sent to participant from the TRS agency after the first payroll deduction.

ENROLLMENT INFORMATION

SECTION I: INSTITUTION INFORMATION

TRS District Number	Name of Employing Agency	Employment Date MM/DD/YY	TRS Eligibility Date MM/DD/YY
1829	ALVIN COMMUNITY COLLEGE		

SECTION II: TO BE COMPLETED BY EMPLOYEE

(If not submitted electronically, please PRINT CLEARLY.)

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Social Security Number

Last Name	First Name	Middle Name	Maiden Name (if applicable)
▼	▼	▼	▼

Date of Birth	Gender	Check your present status	If married, give full name of spouse										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; height: 30px;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> <tr> <td style="text-align: center;">MM</td> <td style="text-align: center;">DD</td> <td style="text-align: center;">YYYY</td> </tr> </table>				MM	DD	YYYY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M <input type="checkbox"/></td> <td style="text-align: center;">F <input type="checkbox"/></td> </tr> </table>	M <input type="checkbox"/>	F <input type="checkbox"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Single <input type="checkbox"/></td> <td style="text-align: center;">Married <input type="checkbox"/></td> </tr> </table>	Single <input type="checkbox"/>	Married <input type="checkbox"/>	<table border="1" style="width: 100%; height: 30px; border-collapse: collapse;"></table>
MM	DD	YYYY											
M <input type="checkbox"/>	F <input type="checkbox"/>												
Single <input type="checkbox"/>	Married <input type="checkbox"/>												

Mailing Address: _____
(Street)

_____ _____ _____ _____
(City) (State) (Zip)

SECTION III: VERIFICATION OF RETIREMENT PARTICIPATION

Please check applicable qualifying event for enrollment in TRS at Alvin Community College.

- I am new to Alvin Community College and employed in a position working 20 or more hours per week.
- I am currently employed in a TRS eligible position with another institution and making active contributions to TRS.

Date Submitted: _____