



TRS/ORP

PLEASE CHECK THE STATEMENT(S) THAT PERTAIN TO YOUR EMPLOYMENT

I understand this position is eligible for TRS only and I am not eligible to participate in ORP.

I understand if my position is listed below, I am eligible for either TRS or ORP:

- Administrators & Certain Directors
- Full-time Faculty
- Licensed Counselor
- Vice President
- Dean
- Librarian
- President

I also understand the selection of retirement plans is irrevocable, a one-time decision, within the State of Texas.

I understand if I become eligible to participate in ORP based on a change in employment status, I must complete the appropriate enrollment paperwork in Human Resources.

I previously made an irrevocable decision to participate in (check one)

TRS

ORP

within the State of Texas at the following institution:

Print Name: _____

Employee Signature

Date