



**TRS NONCLASSIFIED OPTIONAL
EMPLOYEE PARTICIPATION OPT-OUT**

IMPORTANT: Please read instructions on page 2 before completing form.

SECTION ONE – to be completed by employee. Please complete ALL sections.

Employee's First, Middle, Last Name

Employee's SSN

Employee's Telephone

Employee's Date of Birth

Employee's Position

Have you **ever** been a member of TRS working in **any classified position** listed below? Yes ☐ No ☐

- Teacher
- Principal
- Superintendent
- Supervisor/Manager/Director
- Administrator
- Certified Librarian
- Certified/Registered Nurse
- College Professor
- College President, or
- Supervisory/administrative employee whose function is primarily dedicated to public education of any state department, board, board of regents, or board of trustees

If the answer above is YES,  !! You will not be allowed to opt out.

I certify that the information above is true and complete to the best of my knowledge. I understand that by completing this form, I am electing NOT TO PARTICIPATE in TRS and that I can never change this decision. This election follows me to all future eligible nonclassified optional employment at participating TRS employers. I understand this means I will not be allowed to participate in TRS at any TRS employer that I may work for in the future as a nonclassified optional employee. I understand this election is only valid if I am eligible to elect, have no prior classified service, and when completed timely.

Employee's Signature

Date

SECTION TWO – to be completed by employer. Please complete all sections.

Employer

Employer's District Code

Employee's Date of Hire
or Initial Eligibility

Is the employee listed above employed solely in an optional position? Yes ☐ No ☐

If the answer above is NO,  !! The employee will not be allowed to opt out.

I certify that the above-named is an optional employee in the listed position and acknowledge their election.

Signature of Superintendent/Payroll Officer

Date

Purpose of this Form: This form will determine TRS membership for applicable optional employees.

If you DO NOT WANT TO PARTICIPATE in TRS for your optional employment, you MUST submit this FORM. If you WANT TO PARTICIPATE in TRS as an optional employee, DO NOT SUBMIT this form.

This election can only be submitted once for all optional employment. If you have made an election to participate or not participate in TRS at any TRS employer between July 1, 2021 and the present, your prior decision/election will apply. If you do not remember your prior decision/election, call TRS at 405-521-2387.

Instructions for Employee (Section One) – Please complete all sections.

1. **THIS ELECTION MUST BE MADE WITHIN 30 DAYS OF YOUR HIRE DATE OR INITIAL ELIGIBILITY DATE, WHICHEVER IS LATER. FAILURE TO TIMELY MAKE/SUBMIT THIS ELECTION MEANS YOU WILL BECOME A MEMBER OF TRS FOR ALL CURRENT & FUTURE OPTIONAL EMPLOYMENT. APPROPRIATE CONTRIBUTIONS WILL BE OWED. Contributions not paid as a fringe benefit by your employer shall be deducted from your compensation.**
2. Failure to fill out completely could result in a rejection of your form AND cause you to become a participant of TRS for your current employment and all future eligible nonclassified employment.
3. If you answer **YES**, you have been a member of TRS in any **classified position**, STOP. **You cannot opt out.**
 - a. You will be a mandatory participant of TRS in any eligible employment at any TRS participating employer.
 - b. Return to your employer and advise them you must participate in TRS, and they must remit contributions.
4. If you answer **NO** that you have never been a member of TRS in any **classified position**, review the certification to ensure you understand that signing this form means you will never participate in TRS or earn service toward retirement for any optional employment at any TRS employer.
5. Sign and date the form.
6. Keep a copy of this form. Submit the original to your employer so they can complete Section Two.
7. This form is to be filled out only by employees who are eligible optional employees, which means you are regularly working 20 hours or more per week at a TRS participating employer and satisfy [70 O.S. Section 17-101](#), [70 O.S. Section 17-103](#), and other qualifications in Title 70 of the Oklahoma Statutes and [Oklahoma Administrative Code \(OAC\) 715:10-1-4](#).
8. If you are employed in an *ineligible* optional position, any election you make is void (not effective). It will not follow you to future employment. *Ineligible* optional employees are defined in [OAC 715:10-1-5](#).
9. This form should not be filled out if you are a classified employee who is also performing secondary optional duties at the same or a different employer. You are a mandatory participant of TRS due to your classified employment and contributions are due on **all** eligible compensation.
10. If you have opted out of TRS participation while working for an ARP employer (OU/OSU and constituent agencies of both) and you move to optional employment at a non-ARP employer, if you have no prior classified employment AND you have never made this election at any non-ARP employer, you must submit this form to opt out of participation in TRS while employed at non-ARP employers. However, if you have a prior participation election at any non-ARP employer, that election will govern your eligible optional employment at all non-ARP employers.

Instructions for Employer (Section Two)- Please complete all sections.

1. Failure to provide all information could result in rejection of the form and return of the form to the school for proper execution. **Delay may result in late remission of contributions and late fees owed by the employer.**
2. For the listed employee, please provide either the date of hire or date of initial eligibility for TRS, whichever is later. TRS cannot process the form without this information.
3. **Do not process this form** for any employee who is employed in a classified position at the employer.
4. **Do not process this form** for any employee who answers **YES** that they have **prior classified employment/TRS membership**. **They must participate in their optional position.** You must remit appropriate contributions.
5. **Do not process this form for any employee that is not solely employed in an optional position.** A classified employee who is also performing secondary duties of an optional (or ineligible) employee remains a mandatory participant of TRS, and contributions are due on all regular annual compensation for all positions.
6. The payroll officer or the superintendent must sign and date this form which certifies the listed employee's optional status and employment position.
7. Please keep a copy of this completed form in the employee's personnel file.
8. As soon as possible, please send completed form to TRS by fax (405) 522-1534 or mail at PO Box 53524 OKC, OK 73152. TRS discourages emailing this document as it contains personally identifiable information (PII).
9. Ensure you are appropriately reporting your opted out employees in [MyERS](#). See the [TRS Employer Manual](#).