

Teachers' Retirement System of Oklahoma

P.O. Box 53524

Oklahoma City, OK 73152-3524

TRS Member Services: 877-738-6365 (toll-free)

or 405-521-2387 (OKC) Fax: 405-522-1534

PRE-RETIREMENT INFORMATION VERIFICATION

Please submit this cover letter and checklist of the forms and documents enclosed with this request

MAIL TO: Teachers' Retirement System of Oklahoma Attn: Member Services PO Box 53524 Oklahoma City, OK 73152-3524

Please find the following form and documentation enclosed with this request:

I submit this request and documentation for the purpose of retirement planning. This is neither an official application for retirement nor an official designation of beneficiary or joint annuitant. I understand that documentation must be provided for the information to be included in the calculation of estimate or projection of retirement benefits.

If it has been over twelve (12) months since a Pre-Retirement Information Verification (Form 3) or verification of sick leave has been submitted by your current employer to the Teachers' Retirement System of Oklahoma, then a new/revised form and sick leave verification must be submitted. If proof-of-birth documents or marriage license were previously submitted, it is not necessary to submit these documents again unless marital status has changed or I am requesting calculations for a different joint annuitant.

Printed Name of Member:	SS# (last 4 digits):	
Signature of Member:	Date:	
I understand if I am over twelve (12) months from nor retirement projection. However, if I am within twelve normal retirement eligibility, I may receive an estimat that if I wish to pursue retirement, I must complete the within the designated timeline to receive an official retirement and submitted for retirement).	re (12) months from my requested retirement date of the packet entitled <i>Application to Retire</i> . I understand the <i>Application to Retire</i> packet and submit the forms	r d s
Verification of 120 days of accrued/unused sick	,	
Copy of marriage certificate or license (if marria	•	
one person named to receive lifetime benefit upo	,	
Copy of Joint Annuitant's proof of birth (require	red to receive calculations of benefits for the	
Copy of member's proof of birth (mandatory)		
Pre-Retirement Information Verification (Form	3)	
8	with this request.	



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Member Information:			
Name		Social Security Nu	ımber
- ·			
Mailing Address (Street, City, State	e, Zip)		
Date of Birth	Email Address	Daytime Phon	ne
_	1: Please enclose a copy of your proof		list (no originals)
Valid State issued driver		or Federal issued ID	
U.S. Passport (current o		birth certificate	
My proof of birth is enclosed		rth was previously submitted	
Joint Annuitant: (One person who	could potentially continue to receive a lifeti	me monthly benefit upon memb	er's death)
Name	Date of Birth		Relationship
Please Enclose a copy of your joint	annuitant's Proof of Birth (from list ab	ove) to receive joint annuita	nt calculations.
** * *	icense if your joint annuitant is your le	•	
_	<u> </u>		anhanittad
Joint annuitant's proof of birth is	_	t's proof of birth previously	
Marriage license is enclosed Retirement Date:	☐ Marriage licen	se previously submitted	Joint annuitant is not spouse
Please send a multi-year retirer			
At the end of the current school	or fiscal year		
Soonest available date (May in	clude early reduced benefits)		
Other Specific Date:	//		
Employment Status:			
	nployed with an Oklahoma public educ	ation employer. Date of se	paration:/
Active:			
Anticipated last physical da	y on the job (including summer school	ol/adjunct):/	
Current Employer(s)	Position	Hrs. per week	Months per yr. (worked)
Sick Leave:			
Do you have 120 days of unused s	ick leave?		
☐ No If YES, please enclose a copy of p	oay stub or current leave statement.	Sick Leave will not be used	d if verification not attached.
у,	•		
Signature		Date	
Signature		Date	

Retirement application will not be processed until all supporting documents are received.



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TIMELINE FOR RETIREMENT

TO RETIRE ON	Pay Bill Balances, Submit Form 3 or Request Revised Estimates No Later Than	Submit Application to Retire and Employer Retirement Verification No Later Than	Submit Retirement Contract, Tax Withholding, and Direct Deposit Forms No Later Than	Last Day of Active Employment No Later Than	First Retirement Payment Deposited On
January 1	October 1	November 1	December 1	January 10	February 1
February 1	November 1	December 1	January 1	February 10	March 1
March 1	December 1	January 1	February 1	March 10	April 1
April 1	January 1	February 1	March 1	April 10	May 1
May 1	February 1	March 1	April 1	May 10	June 1
June 1	March 1	April 1	May 1	June 10	July 1
July 1	April 1	May 1	June 1	July 10	August 1
August 1	May 1	June 1	July 1	August 10	September 1
September 1	June 1	July 1	August 1	September 10	October 1
October 1	July 1	August 1	September 1	October 10	November 1
November 1	August 1	September 1	October 1	November 10	December 1
December 1	September 1	October 1	November 1	December 10	January 1
Retirement date falls on the first day of each month. The age of member within the first ten days of the month is accepted by TRS as the member age on the first day of the month (i.e. on birthday of July 10 member is age 55, TRS accepts member as age 55 on July 1).	Submit a Pre-Retirement Information Verification (Form 3) and requested documentation to receive a retirement estimate. After a Form 3 is on file, revised estimates may be requested following the same timeline. After Form 3 submission or member request, one of the following will be mailed to you: Projection: Includes a range of several years and is provided if requested retirement date is more than 1 year into the future. Hypothetical Estimate: Includes unpaid service and billings and any other hypothetical possibility than can affect retirement. Cannot be used to begin the retirement process. Application to Retire: Used to begin the retirement process. The ATR cannot include unpaid balances.	The Application to Retire (ATR) is signed and will designate choice of retirement plan and partial lump sum option. The ATR must be signed by both member and spouse (if married). A Retirement Contract packet will be mailed after ATR has been received. The Employer Retirement Verification is to be completed by the employer.	The signed & notarized Retirement Contract, Tax Withholding, and Direct Deposit forms are due to TRS no later than 30 days prior to retirement. PLSO Distribution Election form can be submitted at any time. Benefit payments may be adjusted after final remittances are received.	If member's last day of work is no later than the tenth day of the month, the member may retire the first day of the same month. However, if you qualify for the 90-day (75%) round up provision, then employment must terminate at the end (last day) of the final contract year. Terminating employment before or after last day of final year disqualifies this provision.	The first benefit payment is direct deposited to the member's account one month after the retirement date. Benefits are paid in arrears the first day of following month. (i.e. January retirement benefit minus taxes and health insurance for the month of January-is direct deposited to member's account February 1.)