

## Request for Estimate of Retirement Benefits

1000 Red River Street Austin, TX 78701-2698 (800) 223-8778 www.trs.texas.gov



Name	TRS Participant ID	
Address		
Street Address or Box Number	City State	Zip Code
Phone Number	Date of Birth	
Proposed retirement date(s) (a)	(b)	
(For additional estimates, please visit MyTRS on the TRS website)		
Are you retiring due to a permanent disability?	Yes	No 🔲
Whom do you plan to name as beneficiary at retirement?		
Beneficiary's relationship		
Beneficiary's date of birth		
Beneficiary's Gender	Male Fe	emale
Is the beneficiary a TRS member?	Yes	No 🔲
If "yes", please provide the planned beneficiary's Social Security number.		
Are you currently working for a TRS-covered employer?	Yes	No
What was/is the title of the position you most recently held	?	
Do you have any unpaid service credit that you wish to purchase? (Check all that apply)    Previously Withdrawn TRS Service   Unreported Service and/or Compensation   Substitute Service (requires at least 90 days of substitute service in a school year)   Out-of-State Service   Developmental Leave Service   Military, including USERRA Service   Membership Waiting Period Service   Work Experience by a Career or Technology Teacher Service   State Sick and/or Personal Leave Service (requires 50 days or more, or 400 hours or more of accumulated state sick and/or personal leave)		
Have you ever contributed to any of the following Texas public retirement systems? (Check all that apply)    Employees Retirement System of Texas		
Signature	Date	