



TRS Web Site Password Authorization

The Teacher Retirement System of Texas (TRS) Web site offers a quick and easy way to learn of your TRS benefits, seven days a week. Through the agency's Web site, you can view a variety of materials containing general information related to TRS membership. However, information that is specific to your account is confidential and may be released only as authorized by law. To access your TRS account information, you must authorize TRS to issue you a password for this purpose. In order to have a password issued, you must:

- Have a current address on file with TRS;*
- Read the release statement below;
- Sign this form before a notary public; and
- Return the form to TRS.

Once TRS receives your properly signed and notarized form, a randomly generated password will be sent to the address on file for your account.

* TRS must have your most up-to-date address in order to provide you with a password. To notify TRS of a new address, please complete, sign and return to TRS a Change of Address Notification form (TRS 358). This form may be found on the Forms page of the TRS Web site, or you may request one by calling TRS toll-free at 1-800-223-8778. *However, if you work for a TRS-covered employer that uses the TRS Internet reporting system, you must submit your change of address directly to your employer who, in turn, will submit the change to TRS electronically.*

Will you be submitting a *new* address at this time? ____ Yes ____ No, you have my most recent address.

RELEASE STATEMENT:

I hereby request the Teacher Retirement System of Texas to issue me a personal password that may be used through the TRS Web site to access information regarding my TRS account. I authorize the release of any information regarding my account to anyone using my password. I understand that TRS will mail the password to the address on file for my account. I agree that TRS has no responsibility for the protection of the password once it is mailed. I agree that it is my responsibility to prevent unauthorized use of the password.

 Printed Member Name

 Member Signature

 Social Security Number

STATE OF _____ COUNTY OF _____

Before me, the undersigned authority, a Notary Public, on this day personally appeared _____ known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and official seal this the _____ day of _____, _____
 (Month) (Year)

 Notary Public

(SEAL HERE)