

The University of Texas System
OPTIONAL RETIREMENT PROGRAM ACKNOWLEDGEMENT

Section I: To be completed by all ORP-eligible employees:

- 1) Have you ever been employed in a position eligible to participate in the Optional Retirement Program (ORP) at another institution of higher education in Texas?
_____Yes _____No

- 2) Have you ever been a member of the Optional Retirement Program at another institution of higher education in Texas? _____Yes _____No

- 3) If you answered "yes" to either or both questions above, please complete the following:
Name of Institution: _____
Date of Termination: _____
Did you vest in the ORP? _____Yes _____No
Have you since been employed by the Texas Public School System at an institution other than higher education? _____Yes _____No

Section II: To be completed by ORP-eligible employees eligible for the first time:

I acknowledge that I have been informed of my once per lifetime irrevocable opportunity to elect to participate in the ORP. I understand that if I do not make an election on or before my first day of employment, I will be enrolled temporarily in the Teacher Retirement System of Texas as required by law. I understand that I may still elect to participate in the Optional Retirement Program, but have been advised that if I do not elect by the 90th calendar day after my initial date of ORP eligibility, I lose the privilege of changing from the Teacher Retirement System of Texas to the Optional Retirement Program.

I further understand that if I take advantage of the election to participate in the Optional Retirement Program within that 90-day period, I may request the return of my contributions from the Teacher Retirement System of Texas.

Name (Please print)	Signature	Date
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Employee Identifier	Department
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Beginning Date of Election Period	Ending Date of Election Period
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For additional information, please see The University of Texas System Optional Retirement Program Policy.