

LETTER OF INTENT
TRS BOARD OF CONTROL
Teachers' Retirement System of Alabama
P. O. Box 302150 ♦ Montgomery, AL 36130-2150
334-517-7000 or 877-517-0020
www.rsa-al.gov

PART I MEMBER INFORMATION

Name _____
First Middle Last Maiden

Social Security Number _____ - - Date of Birth _____ / _____ / _____
Month Day Year

Address _____
Street City State Zip Code

Employer (if active) _____

Work Phone _____ Home Phone _____

Are you classified for the position you are intending to be a candidate? ☐ Yes ☐ No

If you are an **active** member, are you contributing to the TRS? ☐ Yes ☐ No

If you are a **retiree**, are you currently receiving a monthly payroll check from the TRS? ☐ Yes ☐ No

PART II MEMBER SIGNATURE

By signing this Letter of Intent to run for the _____ position on the TRS Board of Control, I agree that I am qualified to be a candidate for this position on the TRS Board and will obey the responsibilities set forth by Alabama law. I understand I must submit this Letter of Intent to the TRS by the specified time and date. You must acknowledge your signature before a notary public.

Signature of Member _____ Date: _____

STATE OF _____, COUNTY OF _____

Before me, the undersigned authority, a Notary Public in and for said County and State, on this date personally appeared the applicant for payment, known to me to be the person whose name is subscribed to the foregoing instrument, and declared to me upon oath that the foregoing instrument is true and correct.

Given under my hand and seal of office this the _____ day of _____, 20____.

(Seal)

Signature of Notary Public _____

My Commission Expires _____

**CERTIFICATE OF ASSURANCE
TRS BOARD OF CONTROL**

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Name _____
First Middle Last Maiden

Social Security Number _____ - -

PART I BOARD OF CONTROL RESPONSIBILITIES

Should I be elected to serve as a member of the TRS Board of Control, I agree to:

1. Perform all TRS Board of Control duties required by *Ala. Code* §§ 16-25-1 through 16-25-140.
2. Serve as a trustee of TRS funds.
3. Uphold my fiduciary duty as a member of the TRS Board of Control.
4. Regularly attend and actively participate in TRS Board of Control meetings and committee meetings.
5. Establish appropriate policies for the operation of TRS.
6. Adhere at all times to the Alabama Code of Ethics which is set forth in *Ala. Code* § 36-25-1 through 36-25-30.
7. Serve as a member of the Public Education Employees' Health Insurance Board (PEEHIP Board), performing all duties required by *Ala. Code* §§ 16-25A-1 through 16-25A-17, and upholding my fiduciary duty as a member of the PEEHIP Board.

PART II MEMBER SIGNATURE

By signing this Certificate of Assurance, I agree that I will fulfill the responsibilities set forth above in serving as a member of the Teachers' Retirement System Board of Control. I understand I must submit this Certificate of Assurance to the TRS by the specified time and date. You must acknowledge your signature before a notary public.

Signature of Member _____ Date: _____

STATE OF _____, COUNTY OF _____

Before me, the undersigned authority, a Notary Public in and for said County and State, on this date personally appeared the applicant for payment, known to me to be the person whose name is subscribed to the foregoing instrument, and declared to me upon oath that the foregoing instrument is true and correct.

Given under my hand and seal of office this the _____ day of _____, 20____.

(Seal)

Signature of Notary Public _____

My Commission Expires _____

CANDIDATE BIOGRAPHICAL INFORMATION

TEACHERS' RETIREMENT SYSTEM BOARD OF CONTROL

Please complete and return with your Letter of Intent and Certificate of Assurance.

Name (Mr./Mrs./Ms./Dr.) _____

Address: _____ Daytime Phone No.: (____) _____
Street Address or P. O. Box

_____ Email Address: _____
City State Zip

Employed in public education for _____ years. Fax No.: (____) _____

Employed with _____ since 19____.

Employed _____ years in current position as _____.

Write a short paragraph about yourself to be included on the ballot. Include any qualifications or other related experience and personal information about yourself. List degrees earned (B.A., B.S., etc.), major course of study, and the college or university attended, professional affiliations, and any awards or honors you have received. Continue on back if necessary. This information will also be included on the RSA website. Due to space on the ballot, please limit the paragraph to 200 words.

You may write an additional paragraph explaining why you would like to serve on the Board. This paragraph will be included on the RSA website only. Please limit the paragraph to 200 words.

Note: The paragraphs above will be used verbatim on the ballot and website, but you will have the opportunity to proof read the information. If you are completing your information by hand, please check that the information is legible.

Please attach your photograph.