



Your SSN _____

Employment Type: Full-Time Part-Time Retired

Applicant Information

Please print or type.

Name _____
First Middle Last Maiden

Address _____
Street or P.O. Box City State ZIP Code

Telephone Number _____ Email Address _____

Date of Birth _____

Employer (former employer, if retired) _____

Job Title (former job title, if retired) _____

- Are you classified for the position you are intending to be a candidate? Yes No
- **Active members:** Are you contributing to the TRS? Yes No
- **Retired members:** Are you currently receiving a monthly payroll check from the TRS? Yes No

Signature Certification

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.

Sign Here → Your Signature _____ Date _____

Please have your signature acknowledged before a Notary Public.

State of _____, County of _____

I, _____, a Notary Public, hereby certify that the above named individual whose name is signed to the foregoing document, personally appeared before me and acknowledged under oath that the statements made are true. Given under my hand this _____ day of _____, 20 _____.

Signature of Notary Public _____

My Commission Expires _____



TRS Board of Control Certificate of Assurance

Teachers' Retirement System of Alabama
PO Box 302150, Montgomery, Alabama 36130-2150
877.517.0020 • 334.517.7000 • www.rsa-al.gov



Your SSN _____

Applicant Information

Please print or type.

Name _____
First Middle Last Maiden

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 the TRS.
6. Adhere at all times to the Alabama Code of Ethics which is set forth in Code of Alabama § 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.

Signature Certification

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.

Sign Here → Your Signature _____ Date _____

Please have your signature acknowledged before a Notary Public.

State of _____, County of _____

I, _____, a Notary Public, hereby certify that the above named individual whose name is signed to the foregoing document, personally appeared before me and acknowledged under oath that the statements made are true. Given under my hand this _____ day of _____, 20_____.

Signature of Notary Public _____

My Commission Expires _____



Election Biographical Information

Retirement Systems of Alabama
PO Box 302150, Montgomery, Alabama 36130-2150
877.517.0020 • 334.517.7000 • www.rsa-al.gov



Check One: TRS ERS

Employment Type: Full-Time Part-Time Retired

Applicant Information

Please print or type.

Name _____
(As you wish it to appear on the ballot)

Address _____
Street or P.O. Box City State ZIP Code

Telephone Number _____ Email Address _____

Employer (former employer, if retired) _____

Job Title (former job title, if retired) _____

Biographical Information

Please provide only factual information. Please do not include campaign statements.

All biographies are prepared in a standard format, which are published at the discretion of the Election Committee. For your reference, please see the enclosed sample biography.

Education/Special Courses/Certifications/Etc.:

Employment History (list current/most recent employment first):

Organizational Affiliations (including offices held)/Other Achievements (list most recent first):

Signature Certification

By completing and submitting this biographical sketch, I agree that the above represents true and factual information.

Sign Here → Your Signature _____ Date _____

Election Biographical Information

The text below should be used as samples of information to include in your biography. Exact layout may differ based on ballot specifications for a specific election.

Jane Smith

Town of Mid State

Education

B.S., Business, Auburn University

M.B.A., University of Alabama

Employment History

Clerk, Town of Mid State, 1998-2006

Office Manager, Town of Mid State, 2006-Present

Organizational Affiliations/Other Achievements

Employee of the Month, December 2003

Rotary Club Member, 1998-present

Troop Leader, 2011-2017

John Doe

Retired, Any Town School System

Education

B.S., Early Childhood Education, Troy University

M.B.A., Jacksonville State University

Ed.S., University of South Alabama

Employment History

Teacher, Any Town Elementary School, 2002-2007

Assistant Principal, Any Town Elementary School, 2007-2011

Principal, Any Town Elementary School, 2011-Present

Organizational Affiliations/Other Achievements

Any Town Teacher of the Year, 2006

Elementary Teacher of the Week, 2007