



# Montana Teachers' Retirement System

P.O. Box 200139, Helena, MT 59620-0139  
406-444-3134 • 866-600-4045 • trs.mt.gov

TRS Office Use Only

## FORM 106: MEMBERSHIP ELECTION – SUBSTITUTE TEACHER or PART-TIME TEACHERS' AIDE/PARAPROFESSIONAL

In compliance with the Americans with Disabilities Act of 1990, alternative accessible formats of this document will be provided upon request.

PLEASE TYPE OR PRINT LEGIBLY IN DARK INK

### NEW EMPLOYEE INFORMATION

Full Name: First	Middle	Last	Suffix ( <i>Jr., Sr., etc.</i> )	X X X - X X - Last 4 Digits of SSN
Maiden or Other Name Previously Reported to TRS			Birth Date (mm/dd/yyyy)	( ) Telephone Number
Mailing Address: Street or P.O. Box		City	State	ZIP Code ( <i>use Zip+4 if known</i> )

### – INSTRUCTIONS FOR EMPLOYER –

This membership election is to be completed by a new substitute teacher or part-time teacher's aide/paraprofessional who:

- is **not** already a member or retiree of the Montana Teachers' Retirement System, and
- is **not** currently a Montana University System Retirement Plan (MUSRP) participant (TIAA).

Active or inactive TRS members who have contributions on account with TRS, and retired members who receive monthly benefits from TRS, **must be reported** from their first day of employment, even if they are expected to provide fewer than 210 hours (30 days) of service during the school year.

Substitute teachers and part-time teacher's aides/paraprofessionals who are not TRS members or retirees may elect either to become members of TRS on their first day of service or to postpone membership in TRS until they have provided 210 hours (30 days) of service in a single fiscal year (school year). *Note: If the employee provides service to more than one TRS employer, all hours of service provided for all TRS employers count toward the 210-hour threshold.*

**IMPORTANT:** The employer should **permanently retain this completed form** as proof of the employee's election. If a substitute teacher or part-time teacher's aide/paraprofessional should become vested in TRS and wants to purchase service for the initial 210 hours, the employer may be required to pay the employee's contributions if it cannot be shown that the employee voluntarily elected *not* to participate in TRS for that time period [19-20-302(4)(d), MCA].

### EMPLOYEE QUESTIONNAIRE AND MEMBERSHIP ELECTION

For more information, please read the TRS Fact Sheet *Substitute Teaching* available at: [trs.mt.gov/trsinfo/factsheets](http://trs.mt.gov/trsinfo/factsheets)

(A) Are any of these statements true? *If you mark any box in (A), sign and date this form below. Do not complete (B).*

- I am an active or inactive TRS member with contributions on account with TRS.
- I am a retired member of TRS receiving a monthly benefit.
- I am an active MUSRP / TIAA member who will work *concurrently* for a unit of the Montana University System (MUS) *and* one or more TRS employers.

(B) If **none** of the statements in (A) apply, make a TRS membership election by initialing *one* box and signing below.

- I elect to participate as a member of TRS beginning with my **first day** of service. I understand that my employer must begin deducting contributions from my pay and must remit them to TRS on my behalf.
- (Initial)
- I elect **not** to become a member of TRS until I have completed 210 hours (30 days) of service for one or more TRS employers in a school year, at which time membership will be mandatory. I understand I will not begin accruing creditable service with TRS until I reach the 210-hour threshold and become a member.
- (Initial)

SIGN AND RETURN  
THIS FORM TO  
YOUR EMPLOYER ►

Signature

Date