

TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS



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Change of Address

Please use this form to change only address, telephone, and email information.

Please print or type.

Last name	First name	Middle initial	Maiden name
Social Security number		Date of birth (MM-DD-YYYY)	Gender

Current address

Street address		
Apartment or post office box		
City	State	ZIP code (9-digits)
Home telephone number ()		
Work telephone number ()		
Cell phone number ()		

Former address

Street address		
Apartment or post office box		
City	State	ZIP code (9-digits)
Former telephone number: ()		

Email (optional)

Email allows us to efficiently and conveniently serve you. TRS sends email to immediately respond to your questions if we cannot reach you by phone, notify you about an important change, or to keep you updated about the status of a claim. We will never send confidential information online or share your email address with a third party.

To ensure your spam protection software does not block TRS email, add the following email addresses to your allowed senders list in your spam software: webmaster@trsil.org, members@trsil.org, and trsmessenger@trsil.org.

Current email address	
<input type="checkbox"/> My email address has changed. <i>(Please list your former email address.)</i>	
Former email address	
Certification: I am aware that pursuant to the Illinois Pension Code, 40 ILCS 5/1-135, any person who knowingly makes any false statement or falsifies or permits to be falsified any record in an attempt to defraud the Teachers' Retirement System is guilty of a Class 3 felony. I am aware that, if the TRS Board has reasonable suspicion that a false record has been filed with TRS, it is required to report the matter to the state's attorney for investigation.	
Signature	Date