



**VCU Tax-Deferred Annuity (TDA) Auto-Enrollment Program  
New Hire TDA Opt-out form  
(for new-hire start date of January 1, 2008 or later)**

**Instructions:** Must be completed within 60 days of hire date. Complete and return to VCU Payroll Services, Attention: Payroll Services, Box 842044 Richmond, VA 23284-2511. Questions? Contact VCU Payroll Services at [payroll@vcu.edu](mailto:payroll@vcu.edu) or (804) 828-0740.

**PARTICIPANT INFORMATION**

\_\_\_\_\_  
V-ID # (contact your department's Personnel Administrator for your V-ID #) Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Last Name First Name M.I

\_\_\_\_\_  
Street Address (and Apartment #, if applicable) or P. O. Box #

\_\_\_\_\_  
City State Zip Code + 4

**OPT-OUT ELECTION**

I have received information about the Tax-Deferred Annuity (TDA) Program and, by checking here, I do not wish to make any contributions to the TDA at this time, but reserve the right to contribute at a later time according to TDA plan provisions.

**SIGNATURE**

I have read and understand the materials describing the TDA program. I understand that my election to opt out of participating in the TDA auto-enrollment program will remain in effect until I elect to contribute to a TDA by completing a Salary Reduction Agreement (SRA) and vendor enrollment form(s), as applicable. I further understand it is my responsibility to ensure that my election is properly implemented (by reviewing my payroll statements on eServices/VCU Self Service) and to notify VCU Payroll Services at (804) 828-0740 if I believe there has been an error.

Moreover, I understand that if I fail to notify VCU Human Resources of an error, I will be deemed to have accepted participation in the TDA auto-enrollment program at a contribution level of \$20 each pay period.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name (print):** \_\_\_\_\_