STATE OF NEW JERSEY
Department of Education
P.O. Box 500
Trenton, New Jersey 08625-0500

SCHOOL ETHICS COMMISSION

2025 PERSONAL/RELATIVE DISCLOSURE STATEMENT

This Personal/Relative Disclosure Statement is required annually of all school officials in accordance with *N.J.S.A.* 18A:12-21 *et seq.*, the School Ethics Act (the Act). The Personal/Relative Disclosure Statement must be filed by April 30th of each year, or within thirty (30) days of start of employment or taking office if newly elected or appointed. **This statement is a public record**.

SECTION I. Personal Information

Role of School Official: Administrator

First Name: Joe Middle Initial: A

Last Name: LaRocca

Name and **Business Address** of the Local School District or Charter School (Street, City, State, Zip):

Keansburg Schhol District

100 Palmer Place, Keansburg NJ 07734

County of Local School District or Charter School: Monmouth

Spouse Information (if applicable):

I do not have a spouse. ☐

First Name: Colleen Middle Initial: M

Last Name: LaRocca

SECTION II. Relative Information

1. Do you have a relative, or a person related to you by marriage, who is employed by the local school district or charter school with which you hold office or are employed? For officers or employees of the NJSBA, do you have a relative, or a person related to you by marriage, who is employed by **any** local school district or charter school?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

FULL NAME OF THE INDIVIDUAL	RELATIONSHIP TO THE SCHOOL OFFICIAL	NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL AT WHICH THE INDIVIDUAL IS EMPLOYED	POSITION HELD BY THE INDIVIDUAL

2. Are you or a relative a party to a contract with the local school district or charter school with which you hold office or are employed? For officers or employees of the NJSBA, are you or a relative a party to a contract with **any** local school district or charter school?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

FULL NAME OF THE INDIVIDUAL	RELATIONSHIP TO THE SCHOOL OFFICIAL	NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL	THE NATURE OF THE CONTRACT

3. Are you or a relative employed by, or do you or a relative receive compensation from or have an interest in, any business which is a party to a contract with the local school district or charter school with which you hold office or are employed? For officers and employees of the NJSBA, are you or a relative employed by, receive compensation from, or have an interest in any business which is a party to a contract with **any** local school district or charter school?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

FULL NAME OF BUSINESS	NAME OF THE LOCAL SCHOOL DISTRICT OR CHARTER SCHOOL	THE NATURE OF THE CONTRACT

2025 FINANCIAL DISCLOSURE STATEMENT

This Financial Disclosure Statement is required annually of all school officials in accordance with the Act. The Act requires that the financial information provided by a school official relates to the **preceding calendar year**. The Financial Disclosure Statement must be filed by April 30th of each year, or within thirty (30) days of start of employment or taking office if newly elected or appointed. **This statement is a public record**.

SECTION III. Financial Information

If the information has changed from the preceding calendar year, it is recommended that the official also provide financial information which is current as of five days prior to the date of this filing.

1. In the preceding calendar year, did you or a member of your immediate family receive income, earned or unearned, in excess of $2,000.00?

YES ☑ **NO** ☐

Before providing responsive information below, please note that:

- Individual client fees, customer receipts, or commissions on transactions received through a business organization do **not** need to be separately reported as sources of income; and
- If a publicly traded security or interest derived from a financial institution is the source of income, the security or interest derived from a financial institution does not need to be reported *unless* the school official or a member of their immediate family has an interest in the business organization or financial institution.

If **YES**, please provide the following information:

NAME OF SOURCE OF INCOME	ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP)	RECIPIENT OF SOURCE OF INCOME	RELATIONSHIP TO SCHOOL OFFICIAL
Keansburg BOE	100 Palmer Place, Keansburg, NJ 07734	Joe LaRocca	self
Freehold Borough BOE	280 Park Ave, Freehold, NJ 07728	Colleen LaRocca	Wife

NAME OF SOURCE OF INCOME	ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP)	RECIPIENT OF SOURCE OF INCOME	RELATIONSHIP TO SCHOOL OFFICIAL

2. In the preceding calendar year, did you or a member of your immediate family receive a fee or honorarium having an aggregate amount exceeding $250.00 from any single source for personal appearances, speeches, or writings?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

NAME OF SOURCE OF INCOME	ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP)	RECIPIENT OF SOURCE OF INCOME	RELATIONSHIP OF RECIPIENT TO SCHOOL OFFICIAL

3. In the preceding calendar year, did you or a member of your immediate family receive a gift, reimbursement, or prepaid expense having an aggregate value exceeding $250.00 from any single source, excluding relatives?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

NAME OF SOURCE OF INCOME	ADDRESS FOR SOURCE OF INCOME (STREET, CITY, STATE, AND ZIP)	RECIPIENT OF SOURCE OF INCOME	RELATIONSHIP OF RECIPIENT TO SCHOOL OFFICIAL

4. In the preceding calendar year, did you or a member of your immediate family have an interest in a business organization?

YES ☐ **NO** ☑

If **YES**, please provide the following information:

NAME OF BUSINESS ORGANIZATION	ADDRESS FOR BUSINESS ORGANIZATION (STREET, CITY, STATE, AND ZIP)

CERTIFICATION

I understand that this Certification constitutes my representation of the accuracy of my Personal/Relative and Financial Disclosure Statements. I hereby certify that the within Personal/Relative and Financial Disclosure Statements contain no willful misstatement or omission of material fact, and constitute a full disclosure with respect to all matters required by *N.J.S.A.* 18A:12-21 *et seq*. I am aware that if I fail to file my Personal/Relative and Financial Disclosure Statements, or I file Personal/Relative and Financial Disclosure Statements containing information that I know to be false, I shall be subject to disciplinary action up to and including removal pursuant to *N.J.S.A.* 18A:12-29.

Certified by: Joe LaRocca

Date of Certification:

1/23/25