

CITIZEN LEADERSHIP FORM

If you are a Colts Neck Township resident interested in serving on one or more of the Township's Boards, Commissions, Committees and/or special ad-hoc assignments, please complete this form and send it to:

Kathleen Capristo
Township Administrator/Municipal Clerk
Colts Neck Township
1 Veterans Way
Colts Neck, NJ 07722

e-mail: kcapristo@coltsneck.org

NAME:			
HOME ADDRESS:			
BUSINESS ADDRESS:			
E-MAIL:			
		CELL #	
	www.coltsneck.org f	nent(s) you are seeking. Please for a description of all current ship.	
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3.		4.	

Please indicate why you are seeking an appointment to the a committee, and/or commission and the experience you would brin	
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Please list any other interests or expertise you would like to share	with the Township.
Have you previously served on a Colts Neck Township board, corcommission? Yes No Have you previously served on a board, committee, or commission Yes No If yes, please provide the details below including dates of service of service.	on elsewhere?
In accordance with State statute, a volunteer member appointed Zoning Board or Board of Health must file an annual Financis with the State Local Finance Board on-line at https://www.njfds.ru	al Disclosure Statement
Signature: Date:	