



NORTHERN MARIANAS HOUSING CORPORATION
Community Development Block Grant-Disaster Recovery (CDBG-DR)
Program

JOB VACANCY ANNOUNCEMENT

OPENING DATE: December 4, 2020

CLOSING DATE: December 21, 2020 TIME: 10:00 A.M.

NMHC JVA No.	Positions:	Salary:
2020-008	RE-ANNOUNCEMENT CDBG-DR Loan Supervisor (1- Position)	UNGRADED \$40,000.00 to \$45,000.00- per annum
2020-014	RE-ANNOUNCEMENT CDBG-DR Accountant (2-Positions)	UNGRADED \$25,000.00 to \$30,000.00- per annum
2020-015	RE-ANNOUNCEMENT CDBG-DR Project Supervisor (1-Position)	UNGRADED \$35,000.00 to \$45,000.00- per annum

Employment application form, detailed job description, qualification requirements and other information can be accessed at www.nmhcgov.net.

Applicants may submit their applications through the following options: Submission at the NMHC Central Office in Garapan, Saipan; Drop Box located in front of the NMHC Central Office building; or email application and documents to officemanager@nmhcgov.net.

All applicants must complete and submit the NMHC Employment Application Form together with required documents that are listed in the Employment Application Package. Failure to provide the required documents will result in automatic disqualification. NMHC and all its properties are drug-free zones; therefore, selected applicant will be subject to pre-employment drug screening.

It is the policy of the Northern Marianas Housing Corporation (NMHC) that the merit system will be applied and administered according to the principle of equal opportunity for all citizens and nationals as defined by its personnel regulations and the Northern Marianas Commonwealth Constitution regardless of age, race, sex, religion, political affiliation or belief, marital status, disability or place of origin.

For inquiries, please contact Mr. Jacob Muna, Office Manager, at (670) 234-6866/9447 or by email to officemanager@nmhcgov.net. NMHC is a fair housing agency and an equal opportunity provider, lender and employer.

/s/

JESSE S. PALACIOS
Corporate Director



NORTHERN MARIANAS HOUSING CORPORATION

P.O. BOX 500514, Saipan, MP 96950-0514

Email: nmhc@nmhc.gov.mp

Website: <http://www.nmhc.gov.net>

COMMUNITY DEVELOPMENT BLOCK GRANT-DISASTER RECOVERY (CDBG-DR) PROGRAM

JOB DESCRIPTION

Position: CDBG-DR Accountant
Division: CDBG-DR Office
Immediate Supervisor: CDBG-DR Senior Accountant
Division Manager: CDBG-DR Finance Manager

The CDBG-DR Accountant will be responsible for assisting in complete and accurate monthly reporting of all financial information relevant to the CDBG-DR Program, including account analysis and preparation of financial statements, including reporting in DRGR, and preparation of HUD Quarterly Reports (QPR).

This position is a contract position for a period of two (2) years and renewable every two (2) years depending on satisfactory performance and funding availability.

DUTIES AND RESPONSIBILITIES

1. Record CDBG-DR financial transactions onto the automated accounting journals and registers using Win Ten-2 housing software, Servicer 3D loans software, and HUD reporting websites (DRGR).
2. Prepare accounting journal entries to posts financial transactions and adjustments thereof;
3. Prepare, review, analyze and reconcile general ledger accounts and subsidiary registers critical in the preparation of Financial Statements;
4. Maintain accounting and financial records of CDBG-DR Office housing and community development activities;
5. Assist in the preparation of all funding sources and draw down of funds, including but not limited to CDBG-DR Office funding management. Prepare and enter financial data to HUD websites, including but not limited to Disaster Recovery Grant Reporting (DRGR) System ;
6. Compiles information and prepares reports to assist with the month-end close process and management's financial decisions
7. Provide technical support for year-end accounting closing activities; including analytical review of preliminary trial balances and year-end journal entries, final trial balances and general ledger account balances;
8. Provide technical support for the maintenance of CDBG-DR chart of Accounts and general ledger formats;
9. Assist in the preparation, monitoring, analysis, and enforcement of NMHC/CDBG-DR budgets;
10. Assist in the preparation of indirect cost allocations report and analysis;
11. Provide technical assistance for the preparation of financial schedules and reports for CDBG-DR programs;

“NMHC is an equal employment and fair housing public agency”

12. Provide technical assistance in monitoring of various financial activities to ensure compliance with HUD and GAAP mandated internal control requirements;
13. Prepare a variety of schedules, reconciliations, and summaries of financial transactions;
14. Provide technical support in ensuring compliance with all applicable rules, regulations, standards, policies and procedures; assist in any action necessary to correct nonconformities;
15. Provide technical and functional support to other CDBG-DR accounting staff;
16. Assist in the resolution of financial and accounting problems or issues;
17. Provided technical assistance in ensuring CDBG-DR accounting processes and procedures are in compliance with HUD-mandated rules, regulations, and guidelines through collaboration with other FD staff;
18. Participate in the development and implementation of CDBG-DR accounting goals, objectives, policies, procedures, priorities and plans of actions; and
19. Perform other related duties as required.

Minimum Qualification Requirements:

Education and/or Experience Required:

Any combination equivalent to graduation from an accredited college or university with a Bachelor's Degree in Accounting. Three (3) years of progressively responsible experience in professional accounting level. Must possess excellent communication skills; have ability to function in a fast-paced and changing environment and be detailed oriented.

Knowledge & Abilities:

Must possess strong problem-solving skills; Ability to exercise sound judgment and make decisions based on meaningful data and analysis; Coordinate and correlate operational data with financial transactions; Organize work effectively and maintain accurate and systematic records; Ability to think critically, analyze problems and make coherent and implementable recommendations; Ability to solve practical problems and deal with a variety of operational and financial variables in situations where only limited standardization exists; interpret a variety of instructions furnished in written or oral forms; Ability to work with various computer and accounting software; Maintain database integrity, accuracy, security, and performance efficiency; Must have strong skills in accounting and budgeting principles and procedures and their application to diverse accounting transactions and problems; Must possess strong financial research and report preparation methods and techniques; Must have knowledge of Federal and CNMI Laws, codes and regulations; Ability to accurately exchange information in person or in writing electronically and telephonically

Must have the following abilities: Commitment: Set high standards of performance; pursue aggressive goals and work hard/smart to achieve them; strive for results and success; convey a sense of urgency and bring issues to closure; and persist despite obstacles and opposition; Effective Communication: Ensure important information is passed to those who need to know; convey necessary information clearly and effectively orally or in writing; demonstrate attention to, and convey understanding of, the comments and questions of others; and listen effectively; Analytical: Synthesize complex or diverse information; collect and research data; and use intuition and experience to complement data; Quality: Demonstrate accuracy and thoroughness; look for ways to improve and promote quality; apply feedback to improve performance; monitor own work to ensure quality; Responsiveness and Accountability: Hold oneself personally responsible for one's own work; and do the required fair share of work; must be able to maintain confidentiality and abide by strict ethical standards, integrity, objectivity and confidentiality when dealing with financial information, and budget analysis and must avoid any personal conflicts of interest.

“NMHC is an equal employment and fair housing public agency”



NORTHERN MARIANAS HOUSING CORPORATION

P.O. BOX 500514, Saipan, MP 96950-0514

Email: nmhc@nmhc.gov.mp

Website: <http://www.nmhc.gov.net>



WHAT TO CONSIDER WHEN COMPLETING YOUR APPLICATION FOR EMPLOYMENT

1. Complete as thoroughly and correctly as possible each of the thirty-one (31) items listed on the Employment Application.
2. Before submitting your Employment Application, make sure that you attach the following:
 - a. Cover Letter and Resume
 - b. NMHC Applicant's Statement
 - c. High School Diploma or GED Certificate
 - d. College Degree and/or Official Transcript when claiming a Degree
 - e. Police Clearance (Criminal Record – Good within 90 days)
 - f. Certificate of Training/Workshops
 - g. Professional/occupational License (if any related to the job applied for)
 - h. Form DD-214 (Military Discharge Paper)
 - i. Permanent Resident Card/Passport if not a U.S. Citizen
 - j. Valid CNMI Driver's License
3. Make sure that you sign and date your Employment Application before submitting.
4. If you are applying for a specific job vacancy, make sure that you include position title.
5. Application and required documents must be submitted on or before the closing date of the announcement.

NOTE: FAILURE TO PROVIDE ALL DOCUMENTS NOTED ABOVE WILL BE SUBJECT TO DISQUALIFICATION.

**NMHC IS A DRUGFREE WORKPLACE.
A DRUG SCREENING IS REQUIRED FOR ALL APPLICANTS WHO ARE
CONSIDERED FOR EMPLOYMENT.**

“NMHC is an equal employment and fair housing public agency”

APPLICATION FOR EMPLOYMENT

GENERAL INSTRUCTIONS: BEFORE COMPLETING, PLEASE READ THE CERTIFICATION SECTION AT THE END OF THIS APPLICATION. TYPE OR PRINT ALL ANSWERS CLEARLY WITH A DARK BALL POINT PEN. ANSWER ALL QUESTIONS FULLY AND ACCURATELY; SIGN, DATE AND RETURN THE APPLICATION TO THE NORTHERN MARIANAS HOUSING CORPORATION FOR PROCESSING.						DO NOT WRITE IN THIS SPACE.	
1. POSITION(S) APPLIED FOR		2. ANNOUNCEMENT NUMBER					
3. POSITION(S) APPLIED FOR		4. ANNOUNCEMENT NUMBER					
5. NAME (FIRST, Middle, Last)		6. SOCIAL SECURITY NUMBER					
7. MAILING ADDRESS (P.O. Box Number or Number and Street)		8. PHONE NUMBERS <small>Home Work</small>					
9. ISLAND (or City and State)		10. ZIP CODE					
11. BIRTHDATE (Month, Date, Year)		12. BIRTHPLACE				13. CITIZENSHIP United States <input type="checkbox"/> Other <input type="checkbox"/> Specify: _____	
14. GENDER MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		15. MARITAL STATUS (Married, Single, Widowed, Divorced, Separated)					
16. INDICATE PLACE OF RESIDENCE		PERMANENT RESIDENCE		PRESENT RESIDENCE		17. PERSON ABLE TO CONTACT YOU <small>(Name, Address, Phone Number)</small>	
18. LIST THE LANGUAGES YOU KNOW		Indicate your knowledge by placing "X" in the proper columns.					
		Read	Speak	Understand	Write		
		19. OTHER NAMES WHICH YOU ARE OR HAVE BEEN KNOWN BY					
20. WITHIN THE LAST FIVE YEARS OF EMPLOYMENT HAVE YOU:		a) BEEN TERMINATED FOR ANY REASONS? Yes <input type="checkbox"/> No <input type="checkbox"/>		b) QUIT A JOB TO AVOID BEING TERMINATED Yes <input type="checkbox"/> No <input type="checkbox"/>		c) BEEN CONVICTED OF ANY CRIMINAL OFFENSE Yes <input type="checkbox"/> No <input type="checkbox"/>	
If your answer is "yes" to 20, give details in item 29.							
21. LOWEST PAY YOU WILL ACCEPT \$ _____ per		22. WILL YOU ACCEPT TO TRAVEL (Check one) None <input type="checkbox"/> Some <input type="checkbox"/> Often <input type="checkbox"/>			23. WHEN WILL YOU BE AVAILABLE TO BEGIN WORKING?		
24. LAST PREVIOUS EMPLOYMENT WITH TRUST TERRITORY GOVERNMENT OF THE NORTHERN MARIANA ISLANDS							
(A) Are you retired from and receiving retirement benefits from the Commonwealth government?		a) Yes <input type="checkbox"/>		b) Yes, but qualify for Exemption payment to 1 CMC §8392(a) <input type="checkbox"/>		c) No <input type="checkbox"/>	
(B) Job Title	Organization	Grade or Pay Level		From (Month, Year)	To (Month, Year)		

25. EDUCATION AND TRAINING (Official school transcript and diploma or certificates must be attached to this application upon submission for all education and training claimed under A through I)										
(A) Name and Location of Elementary / High School attended			(B) Highest Grade Completed			(C) If Graduated, Give Date				
(D) Name and location of College/University attended (Start with your present to previous)			Dates attended		Credits Completed		Type of degree	Year of degree		
			From	To	Semester Hours	Quarter Hours				
(E) Chief undergraduate college subjects			Credits Completed		(F) Chief graduate college subjects				Credits Completed	
			Semester Hours	Quarter Hours					Semester Hours	Quarter Hours
(G) Name and location of other schools attended (trade, Vocational, business, military, correspondences)			Credits Completed		(H) Subject studied				If Certificate received, give date	
			From	To						
(I) Special qualifications, skills, honors (licenses, operate office machines, data processing equipment, vehicles, construction equipment, etc.)								Words per minute		
								Typing	Shorthand	
26. EXPERIENCE: Fill in each block completely. Start with your present or most recent employer and work back. Describe all of your work listing your most important duties first. If you supervised others, describe your supervisory responsibilities. If work was part-time show average number of hours worked per week. Account the periods over the last ten years.										
1.	Dates of Employment (Month, Year) From To		Position Title				Do not write in this space			
	Salary Starting \$ per Final \$ per		Place of Employment		Grade or Pay Level					
Name and Address of employer			Name and Title of Immediate Supervisor				Hours Per Week			
Reasons for Leaving						Number and Kind of Employees Supervised				
Description of Work										

IF YOU NEED ADDITIONAL SPACE TO DESCRIBE YOUR WORK EXPERIENCE, USE PLAIN SHEET OF PAPER AND ATTACH TOGETHER WITH THIS APPLICATION.

2.	Dates of Employment (Month, Year) From _____ To _____		Position Title		Do not write in this space
	Salary Starting \$ _____ per Final \$ _____ per		Place of Employment	Grade or Pay Level	
Name and Address of employer			Name and Title of Immediate Supervisor		Hours Per Week
Reasons for Leaving				Number and Kind of Employees Supervised	

Description of Work

3.	Dates of Employment (Month, Year) From _____ To _____		Position Title		Do not write in this space
	Salary Starting \$ _____ per Final \$ _____ per		Place of Employment	Grade or Pay Level	
Name and Address of employer			Name and Title of Immediate Supervisor		Hours Per Week
Reasons for Leaving				Number and Kind of Employees Supervised	

Description of Work

4.	Dates of Employment (Month, Year) From _____ To _____		Position Title		Do not write in this space
	Salary Starting \$ _____ per Final \$ _____ per		Place of Employment	Grade or Pay Level	
Name and Address of employer			Name and Title of Immediate Supervisor		Hours Per Week
Reasons for Leaving				Number and Kind of Employees Supervised	

Description of Work

5.	Dates of Employment (Month, Year) From _____ To _____	Position Title	Do not write in this space
	Salary Starting \$ _____ per _____ Final \$ _____ per _____	Place of Employment	
	Name and Address of employer	Name and Title of Immediate Supervisor	Hours Per Week
	Reasons for Leaving	Number and Kind of Employees Supervised	
Description of Work			
27.	LIST THREE PERSONS NOT RELATED TO YOU WHO HAVE DEFINITE KNOWLEDGE OF YOUR QUALIFICATIONS AND FITNESS FOR THE JOB FOR WHICH YOU ARE APPLYING. (Do not list supervisors you listed under Item 26.)		
	Full Name	Present Address	Business or occupation
28.	MAY WE CONTACT YOUR PRESENT EMPLOYER? Yes <input type="checkbox"/> No <input type="checkbox"/>		
29.	FOR DETAILED ANSWERS, use space below. (Correspond your answer to the item number)		
	Item Number		
30.	ARE YOU OR ANY IMMEDIATE FAMILY A TENANT/LANDLORD UNDER NMHC'S SECTION 8 PROGRAM? Yes <input type="checkbox"/> No <input type="checkbox"/>		
31.	ARE YOU OR YOUR IMMEDIATELY FAMILY A RECIPIENT OF THE HOME LOAN PROGRAM? Yes <input type="checkbox"/> No <input type="checkbox"/>		

ATTENTION: READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION

A false answer or statement, or attempt to deceive or defraud in this application is grounds for rating you ineligible for employment with the; as per PART III A B G of the PSSR&R COMMONWEALTH GOVERNMENT OF THE NORTHERN MARIANA ISLANDS or for dismissing you from employment with the Northern Marianas after appointment. All statements made in this application are subject to investigation, including a check of court records and former employers. All information pertinent to this application will be considered in determining your present fitness for employment with the NORTHERN MARIANAS HOUSING CORPORATION, COMMONWELATH OF THE NORTHERN MARIANA ISLANDS.

CERTIFICATION

I CERTIFY that I have read and understand the foregoing paragraph. I FURTHER CERTIFY that all of the answers and statements made in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith.

SIGNATURE OF APPLICANT (DO NOT PRINT)

DATE (Month, day, year)



NORTHERN MARIANAS HOUSING CORPORATION

P.O. BOX 500514, Saipan, MP 96950-0514

Email: nmhc@nmhc.gov.mp

Website: <http://www.nmhc.gov.net>

Tel: (670)234-6866/9447

Fax: (670)234-9021



NOTE: PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS ADDENDUM TO THE APPLICATION FOR EMPLOYMENT.

APPLICANT'S STATEMENT

I hereby certify that the information provided on my Application for Employment (and accompanying resume, if any) is true and completed to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me for further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize NMHC to make a thorough investigation of my past employment and activities, agree to cooperate in such investigations, and release from any liability or responsibility all persons and companies requesting or supplying information.

I further agree to submit to any lawful drug or other aptitude testing that may be required as a condition of employment or continued employment, and understand that unless otherwise prohibited by law, refusal to submit to drug testing during the course of my employment may result in discharge pursuant to NMHC's Employee Drug and Alcohol Policy.

I certify that I have read and do understand the foregoing paragraphs.

Signed: _____ Date: _____

NMHC is an equal opportunity employer and will not discriminate or tolerate discrimination against any employee or applicant in any manner prohibited by law.

“NMHC is an equal employment and fair housing public agency”