



# NORTHERN MARIANAS HOUSING CORPORATION

## Community Development Block Grant - Disaster Recovery (CDBG-DR) Program

### JOB VACANCY ANNOUNCEMENT

NMHC JVA No.	Positions:	Salary	Opening Date	Closing Date
2025-008	CDBG-DR Finance Manager (1-Position)	UNGRADED \$50,000.00 to \$60,000.00 Per annum	January 29, 2025	Until filled

Employment application form, detailed job description, qualification requirements and other information can be accessed at [www.nmhc.gov.net](http://www.nmhc.gov.net) and [www.cnmi-cdbg-dr.com](http://www.cnmi-cdbg-dr.com).

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; the CDBG-DR Office located on the 3<sup>rd</sup> Floor of the Ladera Building, Chalan Laulau, Beach Road; or email application and documents to [hr@nmhc.gov.net](mailto:hr@nmhc.gov.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 Ms. Elicia San Nicolas, HR Manager, at (670) 234-6866/9447 or by email to [hr@nmhc.gov.net](mailto:hr@nmhc.gov.net). NMHC is a fair housing agency and an equal opportunity provider, lender and employer.

/s/  
**Zenie P. Mafnas**  
Corporate Director



# NORTHERN MARIANAS HOUSING CORPORATION

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

Email: [hr@nmhcgov.net](mailto:hr@nmhcgov.net)

Website: <http://www.nmhcgov.net>

## JOB DESCRIPTION

**Position:** CDBG-DR Finance Manager  
**Division:** CDBG-DR Office  
**Division Manager:** Corporate Director/Deputy Corporate Director

## SUMMARY

The CDBG-DR Finance Manager position is a key position in the overall financial administration and proper grant management of the CDBG-DR program (Program) under the CDBG-DR Division. The CDBG-DR Finance Manager is also a key contributor to the development of the CDBG-DR Action Plan and amendments. The CDBG-DR Finance Manager performs high-level financial controls, administrative and compliance duties, creates and implements policies and procedures necessary to effectively administer the Program, conducts data gathering and research, and compiles reports on housing and community development programs, infrastructure, and economic development in the Commonwealth as they pertain to the Program. The CDBG-DR Finance Manager reports directly to and receives general direction from the Corporate Director and Deputy Corporate Director.

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.

## ESSENTIAL DUTIES & RESPONSIBILITIES

1. Assists in the development and implementation of the CDBG-DR Action Plan;
2. Creates and implements financial controls as well as policies and procedures for the Program;
3. Maintains financial records of the Program;
4. Monitors commitment and expenditures of Program funding to ensure timeliness of funding use;
5. Lead financial evaluator/reviewer for CDBG-DR housing programs, infrastructure program, and economic development program;
6. Reports all progress related to the Program to the Corporate Director, Deputy Corporate Director, and/or Board of Directors;
7. Prepares and submits special financial reports as requested by the Corporate Director, Deputy Corporate Director, and/or the Board of Directors;
8. Resolves issues that may impact project delivery;
9. Supports the staff during HUD and OIG monitoring visits;
10. Must be familiar with the rules and regulations that govern the use of funds as well as any waivers to the CDBG rules with regard to the Program;
11. Collects and analyzes data for long-term recovery planning;
12. Assists in performing outreach activities and interface with the general public;
13. Performs custodial work of all Program-related documents;
14. Prepares correspondences and updates pertaining to the status of projects;
15. Ensures Program compliance within and without the agency;
16. Reviews HUD policy changes, updates, and recommends changes in policies or procedures to maintain compliance;
17. Assists in conducting public hearings;
18. On an annual basis, assist the Deputy Corporate Director in preparing the Consolidated Plan, Annual Action Plan, and the Consolidated Annual Performance Report in relation to the Program;

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19. Addresses financial inquires/concerns of contractors, landlords, and sub-recipients in relation to the Program;
20. Researches other federal grant opportunities and programs; and
21. Performs other related duties as assigned by the Corporate Director and Deputy Corporate Director.

**MINIMUM QUALIFICATION REQUIREMENTS;**

**Education & Experience:**

Master of Accountancy, Public, Business, Finance, Planning Administration or related field from an accredited college or university plus five (5) years of direct experience in internal and/or external auditing and overall financial and accounting management of federal, local, or private agencies and programs; or a Bachelor of Accountancy, Public, Business, Finance, Planning Administration or related field from an accredited college or university. Formal education may be substituted for one year of required work experience plus seven (7) years of direct experience in internal and/or external auditing and overall financial and accounting management of federal, local, or private agencies and programs.

**Certification:**

U.S. Certified Public Accountant preferred.

**Knowledge:**

Excellent in office administration and management. Must have knowledge of U.S. Department of Housing and Urban Development programs, specifically, the CDBG and other CPD programs and local government programs in relation to housing, infrastructure, and economic development. Knowledge of IDIS, DRGR, and other HUD-based computer programs/software and use of environmental assessment forms and regulations. Must have knowledge of Excel spreadsheet, database or statistical analysis software.

**Abilities:**

Must have the ability to formulate plans and programs; ability to prepare, analyze, and interpret technical reports, Federal and local policies, procedures, and regulations; analyze data obtained through reports and/or surveys to develop plans and needed programs. Establish and maintain effective working relationships with individuals and/or groups, committees, and the general public. Must have the ability to relate to staff and management, Board of Directors, local officials, and residents. Must have excellent oral and written communication skills. Must be computer literate to execute a variety of HUD software that is required for reporting and transmitting tenant/resident and other related data electronically to HUD, including word processors, spreadsheet, database, and statistical analysis software. Must have the ability to handle math computation, determine value of tenant's assets, etc. Able to work independently and is a good coordinator/organizer.



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## 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.**

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# APPLICATION FOR EMPLOYMENT

<b>GENERAL INSTRUCTIONS:</b> 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 Home _____ Work _____					
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 (Name, Address, Phone Number)	
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 I 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 <small>(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)</small>							
(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 <small>(Start with your present to previous)</small>	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	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			
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)





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***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.*

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