

Coquille Indian Housing Authority

2678 Mexeye Loop • Coos Bay, OR 97420

Interested in serving on the CIHA Board of Commissioners?

The Coquille Indian Housing Authority (CIHA) is a component unit of the Coquille Indian Tribe funded by the U.S. Department of Housing and Urban Development. The purpose of the Authority is to provide affordable housing opportunities to eligible low-income Tribal members and other Native Americans

CIHA is governed by a seven-member Board of Commissioners appointed by the Tribal Council. The Board oversees the activities of the Housing Authority in compliance with CITC Chapter 130 and applicable Federal law. Commissioners serve staggered, three-year terms and receive a modest monthly stipend.

Application materials are available online at www.coquilleiha.org; at the Housing Authority office located at 2678 Mexeye Loop, Coos Bay, OR 97420; or, by calling CIHA at (541) 888-6501 or toll free at (800) 988-6501. Applications received by 1:00 p.m., Wednesday, June 10, 2020 will be considered for appointment in July 2020.

All persons selected must pass a criminal background investigation and comply with minimum standards of character. Please refer to the Commissioner position description for details.

Completed applications may be submitted to:

Coquille Indian Housing Authority Attn. Anne Cook, Executive Director 2678 Mexeye Loop Coos Bay, OR 97420 Fax (541) 888-8266 annecook@coquilleiha.org

Questions may be directed to Anne Cook at (541) 888-6501, toll free (800) 988-6501, or annecook@coquilleiha.org.



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POSITION DESCRIPTION

Commissioner

GENERAL STATEMENT OF DUTIES

- <u>Determining the Housing Authority's Mission and Purpose</u>: It is the Board's responsibility to create a statement of mission and purpose, and to review it periodically for accuracy and validity. This statement should set out the Housing Authority's goals, means, and primary constituents served. Each Commissioner should fully understand and support it.
- <u>Selecting and Evaluating Executive Management:</u> It is the Board's responsibility to select the Executive Director and to review the work of that individual. The Board must also ensure that the Executive Director, who has responsibility for the administration of the Housing Authority, receives the moral and professional support he or she needs to further the Housing Authority's goals.
- Ensuring Effective Organizational Planning: As steward of the Housing Authority, the Board participates with staff in an overall planning process and assists in implementing the plan's goals. The Board should help management to develop business plans, policy objectives, business strategies, and priorities when needed.
- Ensuring Adequate Resources: One of the Board's foremost responsibilities is to provide adequate resources for the Housing Authority to fulfill its mission. The Board should work in partnership with the Executive Director to explore and pursue appropriate options.
- <u>Managing Resources Effectively:</u> The Board reviews and approves an annual plan and budget, ensuring that proper financial controls are in place.
- Determining, Monitoring, and Strengthening the Housing Authority's Programs and Services: The Board's role in this area is to determine which programs are the most consistent with the Housing Authority's mission, monitor their effectiveness, and ensure compliance with the funder's (i.e. HUD, the Tribe, or other grantors) guidelines and regulations. By reviewing the Housing Authority's activities, the Board ensures the organization's capacity to carry out its programs.
- Ensuring Legal and Ethical Integrity and Maintaining Accountability: The Board is responsible for ensuring adherence to legal and ethical standards. The Board must establish and review pertinent guidelines, and adhere to provisions of the Tribal ordinance and Housing Authority bylaws governing its activities. Board members are fiduciaries and have a fiduciary responsibility to act in the best interests of the Housing Authority, rather than for personal benefit.
- Enhancing the Housing Authority's Public Standing: The Board is the Housing Authority's primary link to the community. Clearly articulating the Housing Authority's mission, accomplishments, and goals to the public, as well as garnering support from members of the community, are important elements for sustaining a healthy organization.

SPECIFIC AND ONGOING DUTIES

- Attending all Board and committee meetings and other functions, such as special events and trainings.
- Being prepared to participate actively by reviewing agendas and supporting materials prior to Board and committee meetings.
- Being attentive during meetings, asking questions, and voting on issues requiring Board action.
- Being prepared to abstain from consideration of items that could be seen as having the appearance of a conflict of interest between one's personal or individual interests and the wellbeing of the Housing Authority.
- Striving to learn something new about the Housing Authority at each Board meeting.
- Selecting and evaluating the performance of the Executive Director.
- Assessing the performance of the Board as a whole and one's performance as a Commissioner on an ongoing basis.

ABILITIES AND KNOWLEDGE REQUIRED

- Ability to read, understand, retain, apply, and ensure compliance with complex principles, including but not limited to federal statutes and regulations, Tribal ordinances, Housing Authority policies and procedures, and other generally accepted business practices.
- Ability to read and understand correspondence, financial statements, progress reports, and other documents.
- Ability to listen, analyze, and think clearly and creatively about issues involving complex concepts.
- A developed sense of values and personal integrity.
- Sensitivity to and tolerance of views and opinions different from ones own.
- Knowledge of parliamentary procedures and Robert's Rules of Order.

MINIMUM STANDARDS

- Ability to pass a criminal background check and drug screening prior to assuming office.
- No past due debt owed to the Coquille Indian Tribe, the Coquille Indian Housing Authority, or other public or Indian housing program.
- For current or prior CIHA program participants and Kilkich residents, substantial compliance with all performance requirements for the most recent five-year period of participation.
- For current or prior employees of the Tribe or its entities, satisfactory performance throughout one's tenure of employment.

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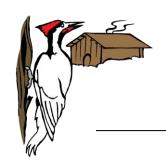
WORKING CONDITIONS AND COMPENSATION

This is an on-call, exempt position typically requiring monthly meeting attendance, weekly check signing, and occasional attendance at other meetings and events. Meeting materials are provided online and meetings may be attended by telephone or video conference. A Board member is paid \$150 per month, less applicable payroll taxes and authorized or mandated deductions, for service as a Commissioner. Travel expenses and electronic equipment for meeting participation are not provided. Full terms of service are three years in length.

APPLICATIONS

Applications are available from, and will be accepted at, the Coquille Indian Housing Authority office located at 2678 Mexeye Loop, Coos Bay, OR 97420. <u>Applications received by 1:00 p.m., June 10, 2020 will be considered for appointment in July 2020.</u> Applications must be fully completed to be considered. Applicants are encouraged to attach a cover letter, resume, certifications, and other supporting documentation. For more information, please contact Anne Cook, Executive Director, at (541) 888-6501.

The statements contained herein reflect general details as necessary to describe the functions of this position, the level of abilities and knowledge typically required, and the scope of responsibility, but should not be considered an all-inclusive listing of performance requirements.



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2678 Mexeye Loop • Coos Bay, OR 97420 Phone: (541) 888-6501 • Fax: (541) 888-8266

REQUESTED INFORMATION FOR THOSE INTERESTED IN BEING CONSIDERED FOR THE CIHA BOARD OF COMMISSIONERS

(Please Print or Type Clearly in Ink)

CENEDAL INFORMATION					
GENERAL INFORMATION					
James.			Data		
Name: Last	First	Midd	 e		
Present Address:					
Street		City	State	Zip	
Mailing Address (If different fro	m present address):	:			
			21		
Telephone Number:		Mess	Message Phone:		
E-Mail:		Cell P	hone:		
Employer:		Work	Phone:		
Employer Address:					
Street		City	State	Zip	
Tribal Affiliation?	No Tribe:		Enrollment Numbe	r:	
f selected, can you provide pro	of that you are auth	orized to work in the	Jnited States? Yes No)	
Current or former employee of	the Coquille Indian 1	Tribe or its entities?	Yes No		
If yes, name of entity and e	mployment dates:_				
Current or former CIHA progran	າ participant or Kilki	ch resident? Yes	No		
If yes, dates of participation	and/or residency:_				
Have you ever been convicted o	_				
If yes, list felony, location, a	nd date:				
lava van baan amadad v	or convicted of a cr	ima involvina a child	violence, sexual assault, sexu	val malastatian sa	

If yes, pleas	If yes, please describe the situation, including the disposition of the charge, date, location, and conviction(s).							
Attach add	litional pages if necessary.							
	ON / QUALIFICATIONS							
Circle Last Gr	rade Level Completed: 1 2 3 4 5 6 7 8 9 10 11 1	12 College: 1 2 3 4 5 6 Technical,						
Fu	ull Name and Location of School(s)	Course of Study	Did you graduate?	List Diploma or Degree				
High School			Yes No					
College			Yes No					
Other			Yes No					
	e a brief statement describing why you wish at you feel are relevant to this position. Atta			kills, and				
abilities the	it you reel are relevant to this position. Atta	ach additional pages it necessar	ry.					
REFERENC	orc							
Please give	the name, address, and telephone number o	of three (3) personal references	•					
		_						
Name	Address		Phone Number					
Name	Address		Phone Number					
Name	Address		Phone Number					
	THIS CERTIFICATION MUST BE SI	IGNED IN ORDER FOR YOU TO	BE CONSIDERED.					
PLEASE READ CAREFULLY BEFORE YOU SIGN.								
I certify that, to the best of my knowledge, all of my statements are true, correct, complete, and made in good faith. I understand any false statement on this application may result in my not being appointed or in my dismissal. I further								
	d that this application is not intended to be a							
or CIHA in a	any way if the Tribe decides to appoint me.	I consent to the release of infor	rmation concerning m	ny personal history				
	e listed on this application. This inquiry, if m haracteristics, and mode of living. I release							
	h information.							
Signature o	of Interested Party:	Da	ate:					