POSITION DESCRIPTION

NICOA Executive Director

Annual Salary $100,000 (may be increased dependent on qualifications)

Reports to: NICOA Board of Directors
FLSA Status: Exempt

SUMMARY STATEMENT

NOTE: It is the policy of National Indian Council on Aging, to have a ZERO tolerance for workplace harassment and violence.

Direct and manage the overall operations of the organization working closely with the Board of Directors to formulate the advocacy agenda and strategic plan for NICOA.

ESSENTIAL FUNCTIONS AND RESPONSIBILITIES:

NOTE: National Indian Council on Aging Board of Directors unilaterally may change these requirements of this job description at any time.

These include, but are not limited to the following:

1. Direct and manage the overall operations of the organization.
2. Responsible for financial stability and growth of the organization.
3. Represent organization at national, regional and local meetings.
4. Supervise and evaluate Finance Director, SCSEP Director, TARPF Director, Executive Assistant and other Directors as assigned.
5. Preside over NICOA staff and Director’s meetings.
6. Coordinate the workflow of Executive Assistant and review work of other direct reports.
7. Formulate budgets and present to Board of Directors for review and approve expenditures.
8. Write grants and formulate fundraising campaigns and present to Board of directors for review.
9. Perform oversight and specified tasks on grant programs.
10. Present to the Board of Directors a plan and agenda for advocacy and networking.
11. Prepare and present quarterly operation reports to Board of Directors.
12. Coordinate all Board meetings with approval of the Chair.
13. Negotiate contracts and oversee conference planning for the biennial with approval of the Board of Directors.
14. Executive Director and Board of Directors will review for approval all official publications, newsletters and materials of the organization and use of the organization’s logo.

OTHER DUTIES AND RESPONSIBILITIES:

Note: These include but are not limited to the following (additional responsibilities may be assigned as necessary):

1. Plan staff retreats and coordinate staff development activities and training.
2. Travel as required to fulfill the mission of the organization and requirements of grants administered by the organization.
3. Attendance in mandatory meetings, training, workshops and/or seminars, including attendance and travel to NICOA's annual week-long staff retreat.
4. Adhere to NICOA policies and procedures.

REQUIRED QUALIFICATIONS (INCLUDES EDUCATION SKILLS AND EXPERIENCE):

- Bachelor’s Degree and at least 3 years of relevant experience in the field of aging services.
- A valid driver’s license, current automobile insurance and reliable transportation for in and out-of-state travel
- Proof of Tribal Enrollment
- 2-3 years of supervisory experience
- Ability to work with Tribal leaders, federal and state officials, customers and health professionals
- Ability to establish and maintain harmonious working relationships with employees, colleagues, community members, Board Members and other persons making contact with NICOA
- Ability to make administrative/procedural decisions and judgments on sensitive and confidential issues
- Excellent computer skills; Demonstrated proficiency in Microsoft Word and Excel
- Excellent verbal, written and presentation communication skills
- Ability to identify and assess business needs and/or issues and find solution or resolution
- Mature judgment and professionalism in handling confidential matters
- Superior dependability including excellent attendance and punctuality

WORKING CONDITIONS AND PHYSICAL EFFORT:

- Work is normally performed in a typical interior/office work environment.
- Noise level is moderate.
- Very limited exposure to physical risk or very limited physical effort required.
- Sitting for prolonged periods.
- Lifting items 20 lbs. or less occasionally.
- Bending or stooping occasionally.
- PC or laptop data entry and word processing.

Equal Employment Opportunity

We are an Equal Opportunity Employer that values workplace diversity.

I have reviewed the above position description and understand this to be a guideline for my current job duties. I understand that the Board of Directors retains the discretion to add or change duties in my position at any time. This position description will be used in evaluating my job performance.

__________________________________________  ________________________
Signature                                      Date

November 3, 2023
It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification. American Indian applicants will be given preference, in accordance with the exemption provided under Title VII of the Civil Rights Act of 1964 for preferential treatment of American Indians.

PERSONAL INFORMATION

Name ___________________________ Date: ___________________________

Last First Middle

Address: ___________________________

Street City State Zip

Telephone Home: __________________ Other: ______ Are you over 18 years old? Yes □ No □

Are you authorized to work in the U.S. on an unrestricted basis? □ Yes □ No

How did you learn of this opening? ___________________________

Have you worked here before? □ Yes, Dates: ___________________________ □ No

Are there any hours, shifts or days you cannot or will not work? ___________________________

Position preferred (check one): □ Full-Time □ Part-Time ___________________________

Are you willing to work overtime as required? □ Yes □ No

Are you related to a current NICOA employee? □ Yes, Name of employee: ____________________ □ No

Have you ever been convicted of a felony? □ Yes □ No (Conviction will not necessarily disqualify an applicant for employment.) If yes, describe conditions: ___________________________

POSITIONS APPLIED FOR

1. ____________________________ 2. ____________________________

Wage or Salary desired? $ ____________________________ When can you start? ____________________________

If you were referred to us by a fellow employee, please provide their name: ____________________________

Do you have a valid driver's license & Insurance? □ Yes, Insurance Co: ____________________ □ No

DL#: ____________________________ Issue Date: ________________ Expiration Date: ________________
# EDUCATION AND ACADEMIC ACHIEVEMENT

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<tr>
<th>EDUCATION</th>
<th>NAME &amp; LOCATION OF SCHOOL</th>
<th>YEAR GRADUATED</th>
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# TRAINING, CERTIFICATIONS, SKILLS, AND ABILITIES
(If you need more space attach a list)

________________________________________________________________________
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# EMPLOYMENT HISTORY AND MILITARY SERVICE

List below current and last two employers, starting with the most recent one first. Please include any non-paid voluntary experience which is related to the job for which you are applying. Please complete even if you attach a resume.

Military Service: Branch ____________________________ From ____________ To ____________

May we contact your current employer?  □ Yes  □ No
EMPILOYMENT HISTORY AND MILITARY SERVICE (continued) Please complete even if you attach a resume.

Most Recent Employer or Current: ___________________________ Dates: ___________________________

Address: ___________________________________________________________

Telephone: ___________________________ Salary on Leaving: $_____________________

Position: ___________________________ Name and Title of Supervisor: ___________________________

Duties: __________________________________________________________________________

_________________________________________________________________________________

Reason for Leaving: _________________________________________________________________

Previous Employer: ___________________________ Dates: ___________________________

Address: ___________________________________________________________

Telephone: ___________________________ Salary on Leaving: $_____________________

Position: ___________________________ Name and Title of Supervisor: ___________________________

Duties: __________________________________________________________________________

_________________________________________________________________________________

Reason for Leaving: _________________________________________________________________

Previous Employer: ___________________________ Dates: ___________________________

Address: ___________________________________________________________

Telephone: ___________________________ Salary on Leaving: $_____________________

Position: ___________________________ Name and Title of Supervisor: ___________________________

Duties: __________________________________________________________________________

_________________________________________________________________________________

Reason for Leaving: _________________________________________________________________
REFERENCES: List three professional references, which you have known at least one year. DO NOT list family members.

Name: ___________________________ Relationship: ___________________________
Address: ___________________________
Street City State Zip
Telephone: ___________________________

Name: ___________________________ Relationship: ___________________________
Address: ___________________________
Street City State Zip
Telephone: ___________________________

Name: ___________________________ Relationship: ___________________________
Address: ___________________________
Street City State Zip
Telephone: ___________________________

Any additional information or explanation of previous question:
________________________________________________________________________
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Signature ___________________________ Date ___________________________