CARSON VALLEY ARTS COUNCIL

EMPLOYMENT APPLICATION

Executive Director

Thank you for your interest in joining the Carson Valley Arts Council.

The Carson Valley Arts Council (CVAC) is seeking a qualified, community-minded leader to serve as Executive Director. The Executive Director oversees daily operations, arts and cultural programming, financial administration, fundraising, facilities, staff and volunteer supervision, and community relations, while working closely with the Board of Directors to advance the organization's mission.

Please complete this application and submit it with your résumé and cover letter. You may attach additional pages if needed.

Application deadline: _November 30, 2026_

Submission instructions: Return the completed application to **Brian Fitzgerald** at **bfitzgerald@cvartscouncil.com**

APPLICANT INFORMATION

Full Name: _

Mailing Address: _

City, State, ZIP: _

Phone Number: _

Email Address: _

Are you legally authorized to work in the United States?

☐ Yes ☐ No

If hired, can you provide documentation establishing your identity and authorization to work in the United States?

☐ Yes ☐ No

Are you able to meet the position's local community engagement and on-site work requirements, with or without reasonable accommodation?

☐ Yes ☐ No ☐ I would like to discuss accommodations

Do you have reliable transportation for travel to CVAC facilities, community events, and meetings?

☐ Yes ☐ No ☐

EDUCATION AND TRAINING

Please list your relevant education, professional training, and certifications.

Institution:

Degree, Certificate, or Trainin

Field of Study: _

Year Completed: _

Additional Education or Training:

Institution: _

Degree or Certificatic

Field of Study: _

Year Completed: _

☐ Résumé attached with additional education and training information.

EMPLOYMENT HISTORY

Please list your most recent employment first. Attach additional pages if necessary.

Current or Most Recent Employer

Employer Name: _

Position/Title: _

Employment Dates: _

Supervisor/Contact (optional)

Employer Contact Information (optional)

Primary Responsibilities:

Reason for Leaving (optional):

Previous Employer

Employer Name:

Position/Title:

Employment Dates:

Primary Responsibilities:

Reason for Leaving (optional):

Previous Employer

Employer Name:

Position/Title:

Employment Dates:

Primary Responsibilities:

Reason for Leaving (optional):

☐ Résumé attached with additional employment history.

RELEVANT EXPERIENCE AND QUALIFICATIONS

Please describe your experience in the areas below. Include specific accomplishments, examples, or measurable results where applicable.

1. Leadership and Organizational Management

Describe your experience managing an organization, department, business, nonprofit, or t

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2. Arts, Culture, and Community Programming

Describe your experience planning arts or cultural programs, public events, educational activities, community initiatives, or similar programming.

3. Financial Management and Budgeting

Describe your experience developing budgets, monitoring expenditures, reviewing financial reports, managing payroll, or overseeing financial operations.

4. Fundraising, Grant Writing, and Donor Relations

Describe your experience obtaining grants, developing donor relationships, securing sponsorships, or coordinating fundraising campaigns.

5. Staff and Volunteer Supervision

Describe your experience recruiting, training, supervising, evaluating, or recognizing employees and volunteers.

6. Facilities, Operations, and Vendor Management

Describe your experience overseeing facilities, contracts, maintenance, tenants, vendors, or day-to-day operations.

7. Marketing, Communications, and Public Relations

Describe your experience with community outreach, social media, website management, newsletters, promotional materials, public speaking, or stakeholder relations.

PROFESSIONAL REFERENCES

Please provide two or three professional references who can speak to your qualifications and work experience. Please confirm their permission before listing them.

Reference 1

Name: _

Professional Relationship:

Organization/Title: _

Phone: _

Email: _

Reference 2

Name: _

Professional Relationship:

Organization/Title: _

Phone: _

Email: _

Reference 3 (Optional)

Name: _

Professional Relationship:

Organization/Title: _

Phone: _

Email: _

REQUIRED APPLICATION MATERIALS

Please indicate which materials you are submitting.

☐ Completed employment application

☐ Current résumé

☐ Cover letter

☐ Additional supporting materials (optional)

Additional materials included

APPLICANT CERTIFICATION

I certify that the information I have provided in this application and in any accompanying materials is true and complete to the best of my knowledge. I understand that material misrepresentations or omissions may affect consideration of my application or, where permitted by law, subsequent employment.

I authorize CVAC to contact the professional references I have provided for purposes related to my candidacy, consistent with applicable law.

I understand that submission of this application does not guarantee an interview or an offer of employment.

Applicant Signature: _

Printed Name: _

Date: _