KSBCDC/458/2024-E5 I/249218/2025



# KERALA STATE BACKWARD CLASSES DEVELOPMENT CORPORATION LIMITED



(A Government of Kerala Undertaking ) CIN-U75122KL1995SGC008705

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KSBCDC/458/2024-E5 Date :06-08-2025

# **VACANCY NOTIFICATION CATEGORY NO: 01/2025**

Applications are invited from qualified candidates for engagement as **Chartered Accountant** on a contract basis in KSBCDC.

1. Post : Chartered Accountant

2. Number of Vacancies : 01

**3. Remuneration** : ₹60,000/- per month (consolidated).

**4.Reporting to** : Managing Director

**5.Employment Type** : Contract

**4. Place of Posting** :KSBCDC Head Office, Thiruvananthapuram.

5.Last date of receipt of Application: 30/08/2025.

#### L COMPANY/DEPARTMENT PROFILE:

Kerala State Backward Classes Development Corporation Ltd (KSBCDC) is a Private Limited Company fully owned by the Government of Kerala, registered under the Companies Act 1956 on 28-02-1995 with its Registered Office at Thiruvananthapuram. The Corporation is also a Non-Banking Finance Company registered with The Reserve Bank of India in the Non-Deposit taking Systemically Important category. The Corporation has offices in all the 14 Districts of the State and 20 Taluk level Sub District Offices. Our Mission is "Freedom from Poverty and Backwardness" of the targeted communities in the State of Kerala.

#### II. JOB DESCRIPTION AND RESPONSIBILITIES:

The Chartered Accountant will be responsible for finalization of company accounts and preparation of financial statements in compliance with IND AS and the Companies Act. The role includes coordinating with statutory/internal auditors, ensuring accurate ledger and trial balance review, and handling month-end/year-end closing of books. The candidate must ensure statutory compliance related to GST, Income Tax, TDS, and ROC filings. They will

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also provide MIS reports, support budget preparation, and assist management in financial planning and decision-making. This position will report directly to the Managing Director.

#### III. ELIGIBILITY:

#### 1. Qualification

Associate Member of the Institute of Chartered Accountants of India (ICAI).

## 2. Age Limit

Maximum 41 years as on 01/08/2025.

#### 3. Desirable Experience:

- One year experience in Accounts Finalisation of financial institutions.
- Preparation of Annual Financial Statements of Companies under IND AS.

#### IV. NOTE TO APPLICANTS:

- 1. The applicants are required to go through the notification carefully and satisfy themselves about their eligibility for this recruitment before applying.
- 2. Admittance to the interview will be provisional only. The Interview Board will have the right not to evaluate the performance of the candidate if material discrepancy is found regarding the applications/credentials at the interview stage. The candidature of such candidate will be rejected.
- 3. Candidates shall submit their applications via offline mode only. Applications submitted via any other medium will be summarily rejected.
- 4. Candidates must attach their essential qualification and essential experience certificates while applying. Those who fail to attach the certificates shall be summarily rejected.
- 5. Candidate should provide a valid email ID and mobile number as all correspondence pertaining to recruitment will be communicated by the email address and mobile number provided at the time of filling offline application.
- 6. Relaxation in upper age limit is applicable to the eligible candidates as per rules.

### How to Apply

Interested candidates may submit their application in the prescribed format along with self-attested copies of certificates proving age, qualification, and experience to the following address on or before 30/08/2025.

#### The Managing Director

Kerala State Backward Classes Development Corporation Ltd. (KSBCDC) Registered Office II Floor, T.C. No:27/588 (7) & (8) Pattoor, Vanchiyoor P.O.

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Thiruvananthapuram - 695 035 Ph: 0471 2577539, 0471 2577540

E mail: ksbcdc@gmail.com

Applications received after the last date or without required documents will be summarily rejected.

**Managing Director** 

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Regd. Office: T.C. 27/588 (7) & (8), "Sentinel", 2<sup>nd</sup> Floor, Pattoor, VanchiyoorP.O., Thiruvananthapuram- 695 035

Phone: 0471-2577550. Fax: 0471-2577539. E Mail:ksbcdc@gmail.com Web: www.ksbcdc.com

"Freedom from poverty and backwardness"

# KERALA STATE BACKWARD CLASSES DEVELOPMENT CORPORATION LTD. (KSBCDC)

# APPLICATION FORM FOR THE POST OF CHARTERED ACCOUNTANT

| 1) Name of the Applicant  | :                   | Affix self-attested                   |  |  |  |  |
|---|---------------------|---------------------------------------|--|--|--|--|
| 2) Date of Birth  | :                   | recent passport size photograph here. |  |  |  |  |
| 3) Age(as on 01/08/2025)  | :                   |                                       |  |  |  |  |
| 4) Gender   | : Male/Female/Other |                                       |  |  |  |  |
| 5) Address for Communication  | :                   |                                       |  |  |  |  |
| 6) Permanent Address (if different)   | Pin                 |                                       |  |  |  |  |
|   | Pin                 |                                       |  |  |  |  |
| 7) Mobile Number  | :                   |                                       |  |  |  |  |
| 8) Email ID   | :                   |                                       |  |  |  |  |
| 9) Educational Qualification (Attach self-attested copies of Certificates ) |                     |                                       |  |  |  |  |

| Sl No. | Name of the Examination Passed | Year of<br>Passing | Name of the<br>Board/University | Division/% of marks obtained) |
|--------|--------------------------------|--------------------|---------------------------------|-------------------------------|
| 1      |                                |                    |                                 |                               |
| 2      |                                |                    |                                 |                               |
| 2      |                                |                    |                                 |                               |
| 3      |                                |                    |                                 |                               |
| 4      |                                |                    |                                 |                               |

|           | Membership No.             |                |            | Date of Mem  | bership                            |  |
|-----------|----------------------------|----------------|------------|--|------------------------------------|--|
| SI<br>No. | Name & address of Employer | Period of From |            | Name of post & pay   | Total<br>duration<br>of<br>service | Nature of work<br>& level of<br>responsibilities |
|           |                            |                |            |  |                                    |  |
|           |                            |                |            |  |                                    |  |
| 11) An    | y other relevant           | information    | :          |  |                                    |  |
|           |                            |                | n provideo | ARATION  d above is true to the symmetry application is liab |                                    |  |
| Place     | Signature of the Candidate |                |            |  |                                    |  |
| Date Name |                            |                |            |  |                                    |  |