Website: www.kwa.kerala.gov.in Mobile/ Whatsapp: +919495998258 Tel. 0471-2738300 Consumer Helpline Number 1916 [24X7] [Toll Free] 1916cckwa@gmail.com



KERALA WATER AUTHORITY

Jalabhavan Thiruvananthapuram – 695033 Kerala - India

File No. KWA-JB/2483/2025-E7

Dated: 25-03-2025

CIRCULAR

Sub: KWA-Admn- Appointment By Transfer as Worker -Inviting Applications-Reg: Ref: G.O (P) No.1/2023/WRD dated 27.01.2023.

Applications are invited for the by transfer appointment as Worker from Part Time employees of Kerala Water Authority. Selection will be on the basis of seniority and qualification prescribed for the post of worker as per the G.O vide reference cited.

The applicant must possess the following qualifications; (i)Pass in 7th or its equivalent

The qualified and willing applicants are requested to send their applications along with all particulars as stated in the proforma attached through their respective controlling officers. While forwarding applications the controlling officers should ensure that the requirements in the proforma attached are fully furnished & should also state the probation status of the incumbent. The applications along with duly filled up proforma should reach in this office within 15 days from the date of this order. The application received after the stipulated time will not be entertained in any circumstances.

Encl:- Proforma

SURAJA NAIR CHIEF ENGINEER

Copy to: 1.Publish in website.

- 2. The Chief Engineer (Southern Region / Central Region/Northern Region) Thiruvananthapuram/Kochi/Kozhikode.
- 3.All Superintending Engineers.

PROFORMA

1.	Name of Employee
2.	Designation
3.	Date of birth
4.	Appointment details (Give details by
	stating No. and date of order)
5.	Date of effect of regularization with No.
	and date of order
6.	Probation status of the incumbent
	with date of declaration of probation, if
	declared.
7.	Date of joining in Service
8.	Qualifications as prescribed in circular
	(with certified copy of certificates)
9.	Details of vigilance cases/disciplinary
	action if any,
10.	Signature of the employee (each employee
	should verify whether the details furnished
	above are correct.
11.	Remarks of Controlling Officer