

HINDUSTAN AERONAUTICS LIMITED

INDUSTRIAL HEALTH CENTER
BANGALORE COMPLEX, Vimanapura Post,

Bangalore - 560017

Telephone: 080-22323005

November 07, 2022

ENGAGEMENT OF X-RAY TECHNICIAN (PART TIME /VISIT BASIS) IN INDUSTRIAL HEALTH CENTER

HINDUSTAN AERONAUTICS LIMITED (HAL), a Navaratna Company, is a Premier Aeronautical Industry of South Asia, with 20 Production Divisions and 10 R&D Centres spread across the Country. HAL's spectrum of expertise encompasses design, development, manufacture, repair, overhaul and upgrade of Aircraft, Helicopters, Aero Engines, Industrial & Marine Gas Turbines, Accessories, Avionics & Systems and Structural components for Satellites and Launch vehicles.

HAL Industrial Health Center, Bangalore-560 017, requires **X-RAY TECHNICIAN** on **PART TIME / VISIT BASIS.** The requirement of the post is as follows:

POST : X-RAY TECHNICIAN (PART TIME/VISIT BASIS)

Advt. No. : IHC/HR/25/11/2022

No. of Posts : **01**

Qualification : SSLC/PUC with Diploma in X-Ray Technology.

Maximum age : Preferably below 40 years

as on **01/11/2022**

Experience as on **01/11/2022**

Tenure

Initially for a period of 2 years renewable at the discretion of the

Minimum 1 Year of Post Qualification Experience in the relevant discipline.

Management.

No. of Visits : 3 visits in a week for minimum of 3-4 hrs per visit **OR**

As per the requirement /need basis.

Remuneration: The candidates are required to indicate the expected Remuneration

per visit, at the time of applying. However, selected candidates will be offered consolidated package (including conveyance) depending

on the qualification and experience.

GENERAL CONDITIONS

- > HAL reserves the right to cancel the advertisement and / or the selection process there under.
- Decision of HAL Management regarding selection will be final.
- ➤ In case of difficulty or for any queries, contact us at 080-22323005/080-22328023 or at hr.medical@hal-india.co.in.
- > Last Date for forwarding the application is 21/11/2022.

HOW TO APPLY:

Interested candidates who meet with the above criteria shall forward their application strictly in the application format given below (neatly typed/hand written) by POST only, so as to reach on or before 21/11/2022 to Chief Manager(HR), Industrial Health Center, Hindustan Aeronautics Limited (Bangalore Complex), Suranjandas Road, (Near Old Airport), Bangalore-560 017 in an Envelope superscribing "APPLICATION FOR THE POST OF X-RAY TECHNICIAN (PART TIME/VISIT BASIS)". Resume/application sent through E-mail will not be entertained. The application shall accompany the self attested Xerox copies of certificates in support of Date of Birth, Educational Qualifications, Experience etc...

Chief Manager(HR)

Encl: Application Format



HINDUSTAN AERONAUTICS LIMITED (BANGALORE COMPLEX) INDUSTRIAL HEALTH CENTER

APPLICATION FOR THE POST OF X-RAY TECHNICIAN (PART TIME/VISIT BASIS)

ADVERTISEMENT NO. IHC/HR/25/11/2022 DATED 07/11/2022

Affix your Passport size photograph here

01	FULL NAME (PLEASE INDICATE IN BLOCK LETTERS)	
02	GENDER	MALE / FEMALE
03	FATHER'S NAME	,
04	MOTHER'S NAME	
05	A) DATE OF BIRTH (DD/MM/YYYY) B) AGE AS ON <u>01/11/2022</u>	
06	STATE OF DOMICILE & NATIONALITY	
07	RELIGION	
08	CATEGORY (indicate (_/) THE CATEGORY YOU BELONG TO)	□ SC □ □ ST □ OBC GEN □ PWD □ EX-SM □ EWS
09	ADDRESS FOR COMMUNICATION WITH CONTACT NUMBER AND E-MAIL	PHONE NO: e-mail ID
10	PERMANENT ADDRESS WITH CONTACT NUMBER	
11	EXPECTED REMUNERATION PER VISIT (IN RUPEES)	

13	IS/ARE ANY OF YOUR CLOSE RELATIVES WORKING IN HAL? IF SO, GIVE DETAILS OF NAME, DESIGNATION, DIVISION HAVE YOU BEEN INTERVIEWED BY HAL ANY TIME EARLIER		NAME DESIG DIVISI POST I DATE (NAME DESIGNATION DIVISION YES / NO POST INTERVIEWED DATE OF INTERVIEW DIVISION						
14 DETAILS OF EDUCATIONAL QUALIFICATION (PLEASE ATTACH COPIES OF										
Name of the University Qualification with /		Whether Time/Par	Whether Full		ion of the e	Month & year of Passing		%age of Marks / Grade / Class		
15 DETA	TICAE	EVDEDTENO	T AC ON O	1/11/20	23 /7	NI VE A DOL	(~			
from first	t to the	EXPERIENC present Job) (PLEASE	ATTACH	COPII	S OF CER	(In chronol	ogica)	ai Ord	ier,
GRADE / DESIGNAT	N	ame of rganisation	Govt / Quasi Govt / PSU / PVT	Type of employi – Part ti Contrac Regular	ment ime / t /	Period of employme (DD/MM/) From	ent	Gro Pay Rs.		Reasons for leaving
		\$ 100 100 A 100 A					3 34			
		9.					20			
	,	e s	282	DECLAR	ATION		I		I	

I do hereby declare that, the above details furnished by me are true and complete to the best of my knowledge and belief. In the event of the said information being found false / incorrect / incomplete, my candidature / Engagement may be terminated without any notice.

PLACE	
DATE	:

(SIGNATURE)

NOTE: Enclose copies of self attested certificates with regard to age, qualification and Experience.