



HINDUSTAN AERONAUTICS LIMITED
(A Govt. of India Undertaking
Under Ministry of Defence)
AVIONICS DIVISION :: HYDERABAD

Advt. No. HAL-HYD/2022/02

DATE : 09.03.2022

Hindustan Aeronautics Limited (HAL) a Navaratna Status Public Sector Undertaking under Ministry of Defence is a premier Aeronautical Industry of South East Asia with 20 Production / Overhaul Service Divisions and 11 co-located 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.

REQUIREMENT :

HAL, Hyderabad a unit of HAL's vast network invites applications from the eligible & willing candidates in the prescribed proforma fulfilling the requirement for the posts of Part-Time Visiting Consultants (Specialist Doctors) in various specialities for its Medical Centre at Hyderabad. The requirements for the posts viz. No. of Posts, Qualification, Experience, No. of Visits per week, No. of Hours per visit etc., are given below:

| Sl No | Name of the Post & Specialty | No. of Post(s) | Particulars of Eligibility Criteria (As on 01-03-2022) | Requirement(s) & Remuneration |
|---|------------------------------|----------------|--|--|
| <i>PART-TIME VISITING CONSULTANTS (SPECIALIST DOCTORS) :</i> | | | | |
| 1 | Dermatologist | 1 | Age : Below 63 years. | No. of visits per week : 2(Two) No. of Hours per visit : 2 (Two) to 4(Four) Hours (* Remuneration : Rs. 2,000/- per visit. Conveyance Charges: Rs. 250/- per visit. |
| 2 | Radiologist | 1 | Qualification : PG Degree / Diploma in relevant specialty / discipline | |
| 3 | Ophthalmologist | 1 | Experience : Minimum 5(Five) years of relevant post qualification experience | |
| 4 | Orthopaedician | 1 | | |
| Note : <i>The above mentioned Qualification(s) should be recognized by MCI (Medical Council of India) / State Medical Council (as the case may be)</i> | | | | |

TENURE :

The initial engagement will be for a period of 2(Two) years. Further, extension of engagement, as per Company's policy, may be considered based on performance of the Visiting Consultant (Specialist Doctor) and also requirement of the Division. Further, the remuneration per visit shall be revised by 10% upon extension of engagement.

TERMS & CONDITIONS OF PART TIME ENGAGEMENT :

- ✓ The engagement of Part-Time Visiting Consultants (Specialist Doctors) will be purely temporary and will not confer any right to them to claim the status of a regular employee of the Company.
- ✓ The Part-Time Visiting Consultants (Specialist Doctors) will not be entitled for any other Allowance or Benefits other than those indicated above and will not confer any right to claim the Benefits / Facilities on par with regular employees of the Company.
- ✓ The Part-Time Visiting Consultants (Specialist Doctors) will abide by the Company's Rules & Regulations governing their engagement.

- ✓ The Part-Time Visiting Consultants (Specialist Doctors) will safeguard the security and confidentiality of all official matters and secrecy of information coming to their knowledge.
- ✓ The Part-Time Visiting Consultants (Specialist Doctors) will be covered under the Income Tax, Service Tax, Professional Tax etc, as per the applicable rules. All such Taxes would be deducted from the remuneration payable to them.
- ✓ Part-Time Visiting Consultants (Specialist Doctors) are required to visit the Company Hospital on suitable days as per the requirements of the Organisation for providing treatment to employees and their dependent family members. In the event of emergency, they will be called as and when required.
- ✓ The part-time engagement is liable to be terminated by giving one month's notice in writing from either side. Further the part-time engagement will stand automatically terminated on completion of the prescribed tenure.

SELECTION PROCEDURE :

Shortlisted eligible candidates will be called for personal interview. Date, time and venue of the interview will be intimated to the shortlisted / eligible candidates via E-mail. Candidates shortlisted for interview are required to bring the certificates / documents in original in proof of age, educational qualification and experience at the time of interview for verification.

HOW TO APPLY :

- ✓ Eligible candidates may submit their duly filled-in applications in the prescribed format in A4 size paper along-with the copies of certificates (self attested) with reference to Age, Educational Qualification and Relevant Experience etc., and post to **CHIEF MANAGER (HR), HR Department, Avionics Division, Post-HAL, Hyderabad – 500 042 on or before 17.03.2022 by Post/Courier.**
- ✓ **The envelope containing the application should be super-scribed with Advertisement No. HAL-HYD/2022/02 and Name of the Post applied for.**
- ✓ **Applications received after 17.03.2022 will not be accepted.**

GENERAL CONDITIONS :

- ✓ Only Indian Nationals need apply.
- ✓ The qualifying degree must be recognized by the Medical Council of India (MCI) / State Medical Council (as the case may be)
- ✓ Mere submission of application will not entail right for claiming part time engagement.
- ✓ HAL Management reserves the right to fill-up or not to fill-up any or all the notified posts. HAL also reserves the right to cancel the advertisement and / or the selection process there under.
- ✓ Decision of HAL Management regarding selection will be final. Further, HAL Management reserves the right to fill-up or otherwise any or all the notified posts and also fill-up the future part time engagements, if any from the valid panel of selected candidates as per the rules of the Company.

- ✓ Copies of Mark Sheets, valid registration certificate and relevant certificates (self attested) must be attached along-with application form.
- ✓ HAL is not responsible for any postal delay.
- ✓ Incomplete Application Form or the application not in prescribed format will be rejected and no correspondence in this regard will be entertained.
- ✓ HAL Management reserves right to call or not to call any / all of the candidates, who have responded against this advertisement.
- ✓ Queries, if any may please be clarified by contacting us at rect.hyd@hal-india.co.in or Ph. No. 040-23776910.

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**HINDUSTAN AERONAUTICS LIMITED
AVIONICS DIVISION :: HYDERABAD
HUMAN RESOURCE DEPARTMENT**

APPLICATION FORM FOR THE POST OF PART-TIME VISITING CONSULTANT (SPECIALIST DOCTORS) IN VARIOUS SPECIALTIES NOTIFIED BY HAL, HYDERABAD DIVISION VIDE ADVT. NO. HAL-HYD/2022/02, DATED 09.03.2022

APPLICATION FOR THE POST OF _____

| | | | |
|----|--|---|--|
| 1 | NAME (IN BLOCK LETTERS) | | Affix recent self attested colour photograph |
| 2 | GENDER | | |
| 3 | FATHER'S NAME | | |
| 4 | MOTHER'S NAME | | |
| 5 | a) DATE OF BIRTH (DD-MM-YYYY) b) AGE AS ON 01-03-2022 | | |
| 6 | STATE OF DOMICILE & NATIONALITY | | |
| 7 | RELIGION | | |
| 8 | WERE YOU DOMICILE OF J&K DURING THE PERIOD FROM 1.01.1980 TO 31.12.1989? (COPY OF CERTIFICATE TO BE PRODUCED AT THE TIME OF DOCUMENT VERIFICATION / INTERVIEW) | YES / NO | |
| 9 | TICK (☑) THE CATEGORY YOU BELONG TO | <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> EWS <input type="checkbox"/> GEN | |
| 10 | ARE YOU A PERSON WITH DISABILITY (PWD)? IF SO, MENTION THE CATEGORY OF DISABILITY (VD/OD/HD) (COPY OF CERTIFICATE TO BE PRODUCED AT THE TIME OF DOCUMENT VERIFICATION / INTERVIEW) | YES / NO VD / OD / HD/ Benchmark Disabilities to be mentioned | |
| 11 | ADDRESS FOR COMMUNICATION WITH CONTACT NO. & E-MAIL ID | _____ | |
| | | Phone No(s). _____ E-Mail ID(s) _____ | |
| 12 | PERMANENT ADDRESS WITH CONTACT NO. | _____ | |
| | | Phone No(s). _____ | |
| 13 | EXPECTED REMUNERATION PER VISIT (In Rupees) | | |
| 14 | HAVE YOU BEEN INTERVIEWED BY HAL ANYTIME EARLIER ? | YES / NO (IF YES, PLEASE PROVIDE THE FOLLOWING DETAILS :) Post Interviewed : _____ Date of Interview : _____ Venue of Interview : _____ | |
| 15 | HAVE YOU EVER BEEN A MEMBER/ WORKER OF ANY POLITICAL PARTY / ORGANISATION OR PARTICIPATED IN ANY POLITICAL ACTIVITIES? | YES / NO | |

| | | | | | | | | |
|----|---|--------------------------|---|---|-----------------------------------|----------------------------|-----------------|--------------------|
| | If 'Yes' please give the following details: a) Name of Political Party / Organisation: b) Particulars of Political Activity (if any): c) Period of Membership (from year) / year of participation in Political Activity: d) Nature of Participation in Political Activity: e) Office, if any, held in Political Party: | | a) b) c) d) e) | | | | | |
| 16 | IS / ARE ANY OF YOUR CLOSE RELATIVES WORKING IN HAL ? | | YES / NO (IF YES, PLEASE PROVIDE THE FOLLOWING DETAILS :) NAME : _____ DESIGNATION : _____ DIVISION : _____ | | | | | |
| 17 | DETAILS OF EDUCATIONAL & PROFESSIONAL QUALIFICATION(S) | | | | | | | |
| | Name of Qualification with Specialization | University / Institution | Nature of course (Full-Time / Part-Time / Correspondence) | Duration of the Course | Month & Year of Passing | % of Marks / Grade / Class | | |
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| 18 | DETAILS OF PROFESSIONAL EXPERIENCE AS ON 01.03.2022 (IN YEARS) _____ (In Chronological Order, from the first to the present Job) | | | | | | | |
| | Grade & Designation | Name of Organization | Govt. / Quasi Govt / PSU / PVT. | Type of Employment (Part-Time / Contract / Permanent) | Period of Employment (DD/MM/YYYY) | | Gross Pay (Rs.) | Reason for Leaving |
| | | | | | From | To | | |
| | | | | | | | | |
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| | | | | | | | | |

DECLARATION

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.

SIGNATURE OF THE CANDIDATE

PLACE :

DATE :

NOTE : Enclose copies of self attested certificates with regard to Age, Qualification, Experience & Valid Registration.