



HINDUSTAN AERONAUTICS LIMITED

CORPORATE OFFICE

Application Format – Post in Executive Cadre

SPECIAL RECRUITMENT DRIVE (PWDs) – 2017 (HAL/HR/36(98)/PWD/III/2017)

(3rd Attempt)

(Please fill the Application Format in **CAPITAL LETTERS** only)

*Paste
Self Attested
recent
passport
size colour
photograph*

1	Name of the Post & Post Code applied for (as per the Detailed Web Advertisement)	
2	Name of the Discipline	Mechanical / Electrical / Electronics / Computer Science
3	Name in Full (As in SSLC / SSC Certificate)	
4	Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
5	Father's Name	
6	Mother's Name	
7	Marital Status	Married <input type="checkbox"/> Unmarried <input type="checkbox"/>
8	Nationality	
9	Sate of Domicile	
10	Date of Birth (DD / MM / YYYY)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
11	Age as on 28.4.17	____ Years ____ Months ____ Days
12	Religion (Please tick):	Hindu / Muslim / Christian / Sikh / Neo - Buddhist / Zoroastrians / Jain / Others specify
13	Category	SC / ST / OBC-NCL / GEN
14	Permanent Address	Address for Communication (All future Communications will be made on this Address only)

Signature of the Candidate: _____

15	Phone / Mobile Number (Compulsory / Mandatory)	
16	E-mail ID (Compulsory / Mandatory)	
All correspondences to the candidates will be made via e – mail on the e – mail id provided by the candidate in the application format. No other method of communication will be adopted.		
17	Nearest Railway Station (with reference to the present address)	
18	Were you domicile of J & K during the period from 01.01.1980 to 31.12.1989? If Yes, please enclose the proof.	Yes <input type="checkbox"/> No <input type="checkbox"/>
19	Are you an Ex – Servicemen?	Yes <input type="checkbox"/> No <input type="checkbox"/>
20	Details of Disability	Please tick whichever is applicable
		<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Visually Handicapped (VH) Yes / No Low Vision Yes / No (Candidates with Low Vision are only Eligible to apply) Degree of Disability _____% Do you Need Assistance /Scribe : Yes / No </td> <td style="width: 50%; vertical-align: top;"> Orthopedically (OH) Yes / No Please tick the category of Disability OL OA OL BL OAL Degree of Disability _____% </td> </tr> </table>
Visually Handicapped (VH) Yes / No Low Vision Yes / No (Candidates with Low Vision are only Eligible to apply) Degree of Disability _____% Do you Need Assistance /Scribe : Yes / No	Orthopedically (OH) Yes / No Please tick the category of Disability OL OA OL BL OAL Degree of Disability _____%	
21	Details of Disability Certificate	Certificate No: Date of Issuance: Issuing Authority:
22	Have you been interviewed by HAL any time earlier? If yes, please give the details of the post for which you have been interviewed and also date/year	Yes / No

Signature of the Candidate: _____

23	Details of the present employment (if applicable): i) Nature of Organization	Private sector / Public sector/ Govt organisation / Quasi Govt. Organisation
	ii) Present Pay and Allowances per month	Scale of Pay: Basic Pay: Grade Pay (if applicable): Dearness Allowance (DA): HRA: Other Allowances (Specify): Gross Salary per month: CTC per Annum:
24	Are you willing to be posted anywhere in India?	Yes / No
25	Have you taken VRS from any PSU/Government organisations? If yes, please mention Date of VRS? And the Amount of received as Ex-gratia?	Yes / No

26. Qualification still pursuing at the time of submission of Application:

Sl. No.	Qualification Name	School / Board / University / Institution	Month & Year of joining the Course	Duration of the course (in Yrs)	Mode of Study Full Time / Part Time / Correspondence	Likely Date / Month / Year of Completion of the Course

Signature of the Candidate: _____

27. Details of Educational Qualification possessed as on date of submission of Application (use a separate sheet if required):

Qualification	Name of the Degree	Discipline / Trade / Subjects	Month & Year of passing the Exam	School / Board / University / Institution	Duration of the Course (in yrs)	Mode of Study Full Time / Part Time / Correspondence	Marks Secured		% of Marks*
							Marks Obtained	Max. Marks	
SSLC / SSC									
Intermediate									
Graduation									
Post Graduation									
Any Other Additional Qualification									

(Note: Please give full & complete information)

* Where ever CGPA or letter Grade is awarded, equivalent percentage of marks should be indicated as per the norms adopted by the University / Institute. A Certificate from the respective University / Institute to this effect should be submitted at the time of document verification.

Signature of the Candidate: _____

28. Details of Employment (in Chronological order) if any (use separate sheet if required)

Sl. No.	Name of the Organization	Designation	Period		Pay Scale / Gross Pay	Reason for Leaving
			From (DD/MM/YY)	To (DD/MM/YY)		

29. Total Experience in No. of Years / Months (if applicable):YearsMonths.

30. Pen picture details (To be typed in about 500 words on a separate sheet and enclosed to the application with your name legibly written on the top of the paper) - Applicable in case of candidates possessing work experience:

- (i) Detailed Picture of the current position held.
- (ii) Pen picture of Professional experience, achievements & significant contribution in the field.

31. Any Other relevant Details:

DECLARATION

I hereby declare that the above statements are true & complete to the best of my knowledge and belief. In case of any changes in the information furnished above, the same will be informed forthwith. In the event, the information is found to be false or incorrect, my candidature / appointment may be considered terminated without any notice.

Place :

Signature of the candidate

Date :

Signature of the Candidate: _____