FUE HAL A Maharatna CPSE

HINDUSTAN AERONAUTICS LIMITED LCA Tejas Division, Bangalore Complex, Bangalore

Application Format

Advt. No: LCA /HR/TBT/2318/2025

<u>DIPLOMA (TECHNICIAN) ON TENURE BASIS</u> (Please fill the Application Format in **CAPITAL LETTERS** only)

Paste Self Attested recent passport size colour photograph

	tick the following before filling the applicat have gone through the "Caution Notice"	tion: indicated in the Notification and on HAL Website.
1	Name of the post applied for *	Diploma Technician (Electrical)
2	(Tiok the relevant Qualification)	QualificationDiploma in Electrical EngineeringDiploma in Electrical and Electronics Engineering
3	HAL Reference Number:	
4	Name in Full (As in SSLC / SSC	
5	Gender*	Male/Female/Transgender
6	Father's Name [*] (As in SSLC / SSC Certificate)	
7	Mother's Name (As in SSLC / SSC Certificate)	
8	Marital Status*	Married/Unmarried/ Divorced/ Widower
9	Nationality*	
10	State of Domicile	
11	Date of Birth (DD /MM/ YYYY) *	
12	Age as on 01.11.2025 [*]	Years Months Days
13	Religion*	Hindu / Muslim / Christian / Sikh /Neo-Buddhist / Zoroastrians / Jain / Others specify
14	Category	SC / ST / OBC / EWS / GEN
15		Address for communication * (All future Communications will be made on this Address only)

16	Phone with STD Code/ mobile number*					
	E-mail ID*					
17	(All correspondences to the candidates will be candidate in the application format. No other	e made via Mail/SMS/e-mail id provided by the method of communication will be adopted.				
	Nearest Railway Station (With reference to the Present Address)					
19	Were you domicile of J & K during the period from 01.01.1980 to 31.12.1989? *	Yes No				
20	Are you a Person with Disability (PWD)	Yes No (If Yes, Q.20 to 23 mandatory)				
	In case of a Person with Disability (PWD), category of disability	Orthoapedically Handicapped Visually Handicapped Hearing Handicapped				
	Categories of Disability (Please Tick) OL- One Leg BL- Both Leg OA-One Arm	OL BL OA OAL				
22	OAL- One Arm & Leg					
		MW LV HH L				
	HH-Hearing Handicapped					
23	Percentage of Disability					
24	Details of Disability Certificate (the certificate should be how recent?)	Certificate No : Date of Issuance: Issuing Authority:				
	Are you an Ex serviceman or are you serving presently in the Armed Forces?	Yes No				
26	Details of the present employment <i>(if applicable):</i> i) Nature of Organization	Private Sector / Public Sector/ Govt. Organisation / Quasi Govt. Organisation/ Self Employed				
	ii) Present Pay and Allowances per month	Scale of Pay: Basic Pay: Dearness Allowance (DA): HRA: Other Allowances (Specify): Gross Salary per month:				

27. Details of Educational Qualification possessed at the time of submission of Application :

Qualification	Name of the	Discipline	Month & Year of Passing the Exam	School / Board / Institution	Duration of Course	Mode of Study (Regular / Part Time/ Correspondence)	Marking Scheme Marks	Marks Secured		
		Subjects						Marks Obtained	Max. Marks	% of Marks
SSLC / SSC										
Diploma in Electrical										
Engg /										
Electrical and										
Electronics										
Any other	Qualific	ation						•	•	•
1										
•										
_										
2										
3										

*Candidates possessing higher qualifications than the required qualification indicated in the Notification against the respective post need not apply. Candidate pursuing / enrolled for any other qualifications should mandatorily indicate the same in the application format. "All the Qualifications possessed by the candidates as also Qualifications/ Courses being pursued by them at the time of submitting the Application for employment, are to be clearly indicated and Qualifications / Courses which are being pursued/ currently undergoing are to be indicated in the Application while submitting the same for notified posts in HAL" Candidature of such personnel who possess higher qualification than the required qualification indicated in the Advertisement / Notification and who apply for the post, will be rejected at any stage of the Recruitment or Selection

61. O.	Designation	Central Govt/ PSU/Private/ Self Employed	Period of posting		Organization Name	Pay Scale / Gross Pay	Reason for Leavir (Transfer /Dischard Resignation/	
			From	То			Promotion)	

Mode of Study
Full time/ Part Time/
Correspondence

Likely da
/month/
Year of

Likely date

Completion Of the Course

Year of

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

Month & Year of

joining the Course

Duration

Course (in

Of the

yrs)

School / Board

/University/

Institution

Qualification

Name

Have you applied for any post/attended written test /Document Verification of HAL	Yes
any time earlier? *	No
If yes, Please give the details of the post for which you have applied/attended Written Test/Document Verification and also date/year*	

32. Any other relevant Details:

DECLARATION

I hereby declare that the above statements including particulars regarding Age, Qualification, and Experience etc. 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 / engagement may be considered terminated without any notice.

	Agreed:
Place:	
Date:	Signature of Candidate