

Performa for Wards of Serving/ Retired/ Deceased Employees of HAL

To,

Chief Manager (Training)
Technical Training Institute,
HAL Avionics Division, Korwa,
Amethi -227412

Sir,

I,, the undersigned, am Son/ Daughter/Spouse
of Shri/ Smt who is/ was a Employee of HAL -
.....Division.

I am interested in doing Apprenticeship Training in HAL, Avionics Division Korwa.

The Employment details of my Father/ Mother/Spouse in HAL are as follows: -

Name			
PB No.			
Category of Employee (Please tick one of the options)	Serving	Retired	Deceased

Declaration

The above information, furnished by me, is true to the best of my knowledge and belief.

Signature of the Candidate

Counter Signature of Parent

Certification by HR Officer

The information provided by Candidate is verified and found correct as per the Official Record of the mentioned HAL Employee.

Signature

Name

P.B. No.....

Designation.....

HAL, Division.....