



HINDUSTAN AERONAUTICS LIMITED
INDUSTRIAL HEALTH CENTER
Vimanapura Post,
Bangalore - 560017
Telephone : 080-22323005

July 05, 2025

ENGAGEMENT OF VISITING CONSULTANT IN INDUSTRIAL HEALTH CENTER

HINDUSTAN AERONAUTICS LIMITED (HAL), a Maharatna 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 **VISITING CONSULTANT**. The requirement of the post is as follows:

1.VISITING CONSULTANT (PSYCHIATRY)

Advt. No.	:	IHC/HR/25/15/2025
No. of Posts	:	01
Qualification	:	MBBS with MD (Psychiatry) OR PG Diploma in Psychiatry
Age as on <u>01/07/2025</u>	:	Preferably below 65 years
Experience as on <u>01/07/2025</u>	:	Minimum 01 Year of Post Qualification Experience in the discipline.
Tenure	:	Initially for a period of 2 years renewable at the discretion of the Management.
No. of Visits	:	2 visits in a week for minimum 2 hrs per visit.
Remuneration	:	The maximum remuneration payable to Visiting Consultant would be upto Rs.7000/- per visit plus conveyance charges depending upon 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 080-22323005/22328023 or at hr.medical@hal-india.co.in

HOW TO APPLY:

Interested Doctors who meet with the above criteria may send their application in the application format given below, by post only, so as to reach on or before **19/07/2025** to **Dy. General 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 Visiting Consultant (Psychiatry)". **Resume /application sent thorough 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 **VISITING CONSULTANT (PSYCHIATRY)**

ADVERTISEMENT NO. IHC/HR/25/15/2025 DATED 05/07/2025

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 01/07/2025		
06	STATE OF DOMICILE & NATIONALITY		
07	RELIGION		
08	CATEGORY (indicate (_/) THE CATEGORY YOU BELONG TO)	<input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC <input type="checkbox"/> GEN <input type="checkbox"/> PWD <input type="checkbox"/> EX-SM <input type="checkbox"/> 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)		

Contd...2...

12	IS/ARE ANY OF YOUR CLOSE RELATIVES WORKING IN HAL? IF SO, GIVE DETAILS OF NAME, DESIGNATION, DIVISION	<p style="text-align: center;">YES / NO</p> <table border="1"> <tr><td>NAME</td></tr> <tr><td>DESIGNATION</td></tr> <tr><td>DIVISION</td></tr> </table>					NAME	DESIGNATION	DIVISION
NAME									
DESIGNATION									
DIVISION									
13	HAVE YOU BEEN INTERVIEWED BY HAL ANY TIME EARLIER	<p style="text-align: center;">YES / NO</p> <table border="1"> <tr><td>POST INTERVIEWED</td></tr> <tr><td>DATE OF INTERVIEW</td></tr> <tr><td>DIVISION</td></tr> </table>					POST INTERVIEWED	DATE OF INTERVIEW	DIVISION
POST INTERVIEWED									
DATE OF INTERVIEW									
DIVISION									
14 DETAILS OF EDUCATIONAL QUALIFICATION (PLEASE ATTACH COPIES OF CERTIFICATES)									
Name of the Qualification with Specialization	University / Institution	Whether Full Time/Part-Time/ Correspondence	Duration of the Course	Month & year of Passing	%age of Marks / Grade / Class				
15 DETAILS OF EXPERIENCE AS ON 01/07/2025 (IN YEARS) (In chronological Order, from first to the present Job) (PLEASE ATTACH COPIES OF CERTIFICATES)									
GRADE / DESIGNATION	Name of Organization	Govt / Quasi Govt / PSU / PVT	Type of employment – Part time / Contract / Regular	Period of employment (DD/MM/YYYY)		Gross Pay Rs.	Reasons for leaving		
				From	To				

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.

PLACE :
DATE :

(SIGNATURE)

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