



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

June 29, 2026

**ENGAGEMENT OF RADIOGRAPHER / X-RAY TECHNICIAN (PART TIME /VISIT BASIS)
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 **RADIOGRAPHER / X-RAY TECHNICIAN** on **PART TIME / VISIT BASIS**. The requirement of the post is as follows:

POST	:	RADIOGRAPHER / X-RAY TECHNICIAN (PART TIME/VISIT BASIS)
Advt. No.	:	IHC/HR/25/16/2026
No. of Posts	:	02
Qualification	:	SSLC / PUC with Diploma in Radiography / Diploma in Medical X-Ray Technology OR Bachelor in Medical Imaging Technology
Maximum age as on 01/06/2026	:	Preferably below 40 years
Experience as on 01/06/2026	:	Minimum 1 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	:	As per Company Rules.
Remuneration	:	As per Company Rules.

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 080-22323005/080-22328023 or at hr.medical@hal-india.co.in.
- Last Date for forwarding the application is **13/07/2026**.

HOW TO APPLY:

Interested candidates who meet with the above criteria shall forward their application strictly in the application format given below (neatly typed/hand written) by **POST** only, so as to reach on or before **13/07/2026** to **Dy. General Manager(HR), Industrial Health Center, Hindustan Aeronautics Limited, Suranjandas Road, (Near Old Airport), Bangalore-560 017** in an Envelope superscribing **"APPLICATION FOR THE POST OF RADIOGRAPHER / X-RAY TECHNICIAN"**. Resume/application sent through 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...

Dy. General Manager(HR)

Encl: Application Format

12	IS/ARE ANY OF YOUR CLOSE RELATIVES WORKING IN HAL? IF SO, GIVE DETAILS OF NAME, DESIGNATION, DIVISION	YES / NO				
		<table border="1" style="width: 100%;"> <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	YES / NO				
		<table border="1" style="width: 100%;"> <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 01/06/2026 (IN YEARS)(In chronological Order, from first to the present Job) (PLEASE ATTACH COPIES OF CERTIFICATES)

GRADE / DESIGNATION	Name of Organisation	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.