APPLICATION FORM



KORAPUT DIVISION, SUNABEDA-763002, ODISHA

Paste self attested recent passport size photograph

Advertisement No.: KPT/IHC/2023-01 dated 12-04-2023

Application for the Post of _

at Sl. No. 2 () of Para 2 of the Advertisement

01	Name (In Capital Letters)	
02	Gender	
03	Father's Name (In Capital Letters)	
04	Mother's Name (In Capital Letters)	
05	Name of Spouse & Occupation of spouse, if married.	
06	Date of Birth (DD/ MM/YYYY)	
07	State of Domicile & Nationality	
	Contact/ Mailing Address	Permanent Address
08		
09	Mobile No.	Email ID
10	Nearest Railway Station	
11	Religion	
12	Were you domicile of Jammu & Kashmir during the period from 01.01.1980 to 31.12.1989? If so, please enclose the proof.	YES / NO

	Circle the Category (Enclose copy of Certificate in case of SC/ST		GEN / OBC (NCL)/ SC / ST/EWS		
13		DBC (Non creamy layer)/EWS)	Sub Caste:		
14	Di If Di (E)	e you a Person with Benchmark sability (PwBD)? Yes, mention the category of sability (VD/OD/HD) nclose a copy of disability rtificate)	Yes / No % of Disability :		
		Are you an Ex-Serviceman?	Υe	es / No	
	a	If Yes, mention the last Rank held and the number of years served in the Rank.			
15	b	Are you Serving as Officer in the Armed forces (Navy / Army / Air Force)?	Yes / No		
	D	If Yes, mention the present Rank and the number of years completed in the Rank.			
	Have you been interviewed by HAL anytime earlier?		Yes / No		
	If	yes, kindly mention the following deta	ails;		
16	Post interviewed for				
	Da	ate / Year of interview			
	Ve	nue of interview			
17	re If	hether any of your close latives are working in HAL? yes, please provide details of ame, Designation, Division etc.			
18	La	nguages known			
	W Or an	ave you ever been a Member/ orker of any Political Party/ rganization or participated in ny Political activities?		Yes / No	
19		Yes' please give the following deta	ils:		
		ame of Political Party / rganization:			
		urticulars of Political Activity (if ay):			

Period of Membership (from year)/year of participation in Political Activity	
Nature of Participation in Political Activity	
Office, if any, held in Political Party:	

20. EDUCATIONAL QUALIFICATION: (Academic and Professional – only from Degree onwards)

Name of Qualification with specialisation wherever applicable	Institution / University	Nature of the Course (Full Time / Part Time / Correspondence)	Duration of the Course	Subjects / Specialisation	Class / Division	% of Marks	Month & year of Passing
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

(Use separate sheets, if required)

Note: (i) In case of CGPA or any other similar assessment criteria, equivalent percentage is to be mentioned as per norms adopted by the University / Institute. (ii) Please give full & complete information. Use separate sheets if required.

21. Details of Training/ Certifications undergone in the last 5 years

Name of the training	Institution /	In India /	Duration of the Training			
Program	Organization	in Abroad	From	То		
Tiogram	Organization	mnbroad	(dd/mm/yyyy)	(dd/mm/yyyy)		
(1)	(2)	(3)	(4)	(5)		

(Use separate sheets, if required)

22. Professional Experience (from the First Job onwards to Current Job) In Chronological Order:

		Central Govt.	On Contract /	Da	te			
Designation / Name of the position /Name of the post	Name of the Organization/ Establishment / Employer	/State Govt./ Central PSU / State PSU / Private Org.	Ad-hoc /permanen t / Temporary / On-the- job training	From (dd/ mm/ yy)	To (dd/ mm/ yy)	Pay Scale	Gross Pay	Reason for Leaving
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Note : Please give complete details for the experience profile like Date, Month & year. Use separate sheets if required).

23. Detailed picture of the current Position held by you in the present organization.

(To be typed in about 100 words. If place is not sufficient here, the same may be enclosed to the application with your name on the top of the paper):

24	Number of completed years of experience after	
24	completion of Professional Qualification:	
25	Present Scale of Pay	
а	Basic Pay	
b	Grade Pay, if any.	
с	Dearness Allowance (DA)	
d	Gross Pay	
	Date of Seniority (in the present post / Grade /	
26	Rank) in DD/MM/YYYY format	
27	Expected Salary from HAL per month	
28	If Selected, How soon can you join HAL?	
	Please mention in months.	

29. Pen picture of professional achievements and significant contribution in the field.

(To be typed in about 100 words. If place is not sufficient here, the same may be enclosed to the application with your name on the top of the paper):

30	Have you availed Voluntary Retirement (VRS) or benefits of a similar scheme from any of your previous employer?	Yes / No
30	If Yes, please mention details:	

31. Details of Application Fee:

Mode of Payment (Net-Banking/ UPI/ Off-line/ etc.)	Transaction Reference	Date of Payment	Amount Paid (in INR)			
Note: Kindly attach the proof of having made the payment along with the application form. The						
same is mandatory for the application to be considered, in applicable cases.						

32. I hereby declare that the above information/statements are true and complete to the best of my knowledge and belief. I understand that in the event the information is found to be false or incorrect, my candidature/appointment may be considered as terminated without any notice.

Place: _____

Date: ____/___/____

Signature of the Candidate

Note: The candidate is required to submit completely filled application without leaving any field unfilled. Incomplete application(s) will be rejected No correspondence will be entertained. The candidate should not attach any documents with the application blank other than the specified one in the application blank. No candidate shall submit/ forward multiple applications for the same post.