

HINDUSTAN AERONAUTICS LIMITED

INDUSTRIAL HEALTH CENTER
BANGALORE COMPLEX, Vimanapura Post,

Bangalore - 560017

Telephone: 080-22323005

September 13, 2024

ENGAGEMENT OF REFRACTIONIST (PART TIME /VISIT BASIS) IN INDUSTRIAL HEALTH CENTER

HINDUSTAN AERONAUTICS LIMITED (HAL), a Navaratna 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 **REFRACTIONIST** on **PART TIME / VISIT BASIS.** The requirement of the post is as follows:

POST : REFRACTIONIST (PART TIME/VISIT BASIS)

Advt. No. : IHC/HR/25/26/2024

No. of Posts : 02

Oualification : PUC with Diploma in Ophthalmic Assistant OR

B.Sc in Optometry.

Maximum age

as on 01/09/2024

Preferably below 40 years

Experience : as on <u>01/09/2024</u>

Minimum 2 Years of Post Qualification Experience for Diploma in

Ophthalmic Assistant OR O1 Year experience for Post B.Sc Optometry

Tenure : Initially for

Initially for a period of 2 years renewable at the discretion of the

Management.

No. of Visits

3 visits in a week for minimum of 3-4 hrs per visit OR

As per the requirement /need basis.

Remuneration :

The candidates are required to indicate the expected Remuneration per visit, at the time of applying. However, selected candidates will be offered consolidated package (including conveyance) depending

on 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 080-22323005/080-22328023 or at hr.medical@hal-india.co.in.
- > Last Date for forwarding the application is 27/09/2024.

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 27/09/2024 to Chief 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 REFRACTIONIST (PART TIME/ VISIT BASIS)". 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...

Chief Manager(HR)

Encl: Application Format



HINDUSTAN AERONAUTICS LIMITED (BANGALORE COMPLEX) INDUSTRIAL HEALTH CENTER

APPLICATION FOR THE POST OF REFRACTIONIST (PART TIME/VISIT BASIS)

ADVERTISEMENT NO. IHC/HR/25/26/2024 DATED 13/09/2024

Affix	your	Passport
size	ph	iotograph
here		

FULL NAME (PLEASE INDICATE IN BLOCK LETTERS)	
GENDER	MALE / FEMALE
FATHER'S NAME	
MOTHER'S NAME	
A) DATE OF BIRTH (DD/MM/YYYY) B) AGE AS ON <u>01/09/2024</u>	·
STATE OF DOMICILE & NATIONALITY	
RELIGION	
CATEGORY (indicate (√) THE CATEGORY YOU BELONG TO)	☐ SC ☐ ☐ ST ☐ OBC GEN ☐ PWD ☐ EX-SM ☐ EWS
ADDRESS FOR COMMUNICATION WITH CONTACT NUMBER AND E-MAIL	PHONE NO: e-mail ID
PERMANENT ADDRESS WITH CONTACT NUMBER	
EXPECTED REMUNERATION PER VISIT (IN RUPEES)	
	IN BLOCK LETTERS) GENDER FATHER'S NAME MOTHER'S NAME A) DATE OF BIRTH (DD/MM/YYYY) B) AGE AS ON 01/09/2024 STATE OF DOMICILE & NATIONALITY RELIGION CATEGORY (indicate (√) THE CATEGORY YOU BELONG TO) ADDRESS FOR COMMUNICATION WITH CONTACT NUMBER AND E-MAIL PERMANENT ADDRESS WITH CONTACT NUMBER EXPECTED REMUNERATION

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CERTIFIC			DOCALION	AL QUALIF	LICATIO	N (PER	ASE ATTA	CH COPIES	OF		
Name of t Qualificati Specializa	he on with		University / Institution	Whether Time/Part Correspon	t-Time/	Durati Course	on of the	Month & ye of Passing	ar	%ag Mark Grac Class	rs / le /

								(In chronole TIFICATES)		al Ord	der,
GRADE / DESIGNAT	1 .		ganisation	Govt / Quasi Govt / PSU / PVT	Type of employi – Part t Contrac Regular	ment ime / t /	Period of employme (DD/MM/) From		Gro Pay Rs.		Reasons for leaving
	And purpose the second				7.090.01						

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	:	(SIGNATURE)
DATE	:	

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