

HINDUSTAN AERONAUTICS LIMITED

INDUSTRIAL HEALTH CENTER BANGALORE COMPLEX, Vimanapura Post,

Bangalore - 560017 Telephone: 080-22323005

April 04, 2024

ENGAGEMENT OF SPEECH THERAPIST (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 SPEECH THERAPIST on PART TIME / VISIT BASIS. The requirement of the post is as follows:

POST SPEECH THERAPIST (PART TIME/VISIT BASIS)

Advt. No.

IHC/HR/25/05/2024

No. of Posts

01

Qualification

MASLP (Master in Audiology and Speech - Language Pathology) with

Experience in Speech Therapy OR M.Sc in Speech.

Maximum age

Preferably below 40 years

as on 01/04/2024

Experience

Minimum 1 Year of Post Qualification Experience in the relevant discipline.

as on **01/04/2024**

Tenure 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 18/04/2024.

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 18/04/2024 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 SPEECH THERAPIST (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...

Encl: Application Format

Chief Manager(HR)



HINDUSTAN AERONAUTICS LIMITED (BANGALORE COMPLEX) INDUSTRIAL HEALTH CENTER

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

ADVERTISEMENT NO. IHC/HR/25/05/2024 DATED 04/04/2024

Affix	your	Passport
size		otograph
here		

01	FULL NAME (PLEASE INDICATE IN BLOCK LETTERS)					
02	GENDER	MALE / FEMALE				
03	FATHER'S NAME	MALE / FEMALE				
04	MOTHER'S NAME					
05	A) DATE OF BIRTH (DD/MM/YYYY) B) AGE AS ON <u>01/04/2024</u>					
06	STATE OF DOMICILE & NATIONALITY					
07	RELIGION					
08	CATEGORY (indicate (√) THE CATEGORY YOU BELONG TO)	SC ST OBC GEN PWD EX-SM 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...

13	IS/ARE ANY OF YOUR CLOSE RELATIVES WORKING IN HAL? IF SO, GIVE DETAILS OF NAME, DESIGNATION, DIVISION HAVE YOU BEEN INTERVIEWED BY HAL ANY TIME EARLIER		NA DE	ME SIGNATIO VISION	N		NO NO			
14 DETA			DA	POST INTERVIEWED DATE OF INTERVIEW DIVISION QUALIFICATION (PLEASE ATTACH COPIES OF						
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GRADE / DESIGNATION		ON Organisation Q		Sovt / Type of employs of port / Part t Contrac Regular		Period of employme (DD/MM/) From			for	Reasons for leaving

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	:	(CICNATURE)
DATE :	(SIGNATURE)	

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