

Hindustan Aeronautics Limited.

Aircraft Division, Nashik Ojhar Township (Post), Nashik-422207



Application Form

Application Number	KPT00005	
Post Applied for	ESM Technician (Mechanician-Air Electrical)	
Name of Applicant	KAIF TEST	
Date of Birth : 12-10-2001	Age as on 01-05-2024: 22 years, 0 months and 22 days	Burn



Basic Details:

Father's Name : FFF NAME		Mother's Name : MM NAME	
Gender : Male	Marital Status : Single		Religion : Islam
Category : OBC(NCL)	Caste Certificate No. : ANSARI		Issue Date : 12-12-1990 00:00:00
PwD : No	PwD Type :		PwD % : 0
Aadhar No. : 397788000234	EMail Id : kaif.ansari@jsrfg.in		Mobile No. : 9988776655
Domicile State : UTTAR PRADESH	Domicile of Jammu & Kashmir	: No	Issue Date : 01-01-1900

Relevant Experiences? : No

Ex-Serviceman Experience(Armed Forces)?: No

Address Details:

Communication Address	280-A, MUNIRKA, NEW PAHADI PARK, DELHI, DELHI, DELHI, 231010, DEL, DEL
Permanent Address	280-A, MUNIRKA, NEW PAHADI PARK, DELHI, DELHI, DELHI, 231010, DEL, DEL

Educational Qualifications:

Examination Passed	Stream	Education Mode	Name of Board/University	Passing Year	Marks(%)
10th	РСВ	Full Time	TENTH	12-12-2001	88.88

Detaiol of Airforce:

Airforce Trade	Date
AIRFORCE TRADE NAME	10-02-2011

Working Experience, if any:

Name of the Post	Name of Organisation	Date of Joining	Date of Leaving	Salary (P.M.)	Period
POST HELD	NAME OF ORG	10-01-2001	10-03-2003	131313.00	2Year 2Month 0Days

Have you done any Apprenticeship in HAL? : No

Have you been Interviewed by HAL any time earlier? : Yes

Post Interviewed	Date of Interview	Venue of Interview
POST OF INTERVIEW	20-10-2000	VENUE OF INTERWIEW

Are any of your close relatives working in HAL, Koraput? : Yes

Name of Relative	Designation	Division	Any other Description
RELATIVE NAME	DESIGNATION	DIVISION	

Member/Worker of any Political Party/Organisation or Participated in any Political Activities? : Yes

Name of Political Party/Organisation	Particulars of Political Activity		Nature of Participation in Political Activity	Office, if any held in Political Party
NAME OF POLITICAL	,	'	,	NAME OF POLITICAL

PARTY ORG	POLITICAL ACTIVITY		PARTY ORG	PARTY ORG
Declarations				•
declared that neither Crimi in or related with any crimin to be false, the HAL, Korap the examination at its sole	out may cancel my candidature discretion. I further declare tha	e nor I have ever b ng moral turpitude at any stage of Se t if I obtain appoin	een punished by any of any that if anything election process and returned to any false or	court of law, nor am I involved ng stated herein above turns out may debar me from appearing in
I accept the above mention	nated/cancelled and I shall be ned declaration : Yes	liable for prosecuti	on under the Law.	
Pahul Raj				
			(Signature o	of Applicant)

ANNEXURE-B

CHIEF MEDICAL OFFICER

Cartificate No. 2366

Date 30/12/09

Certificate 140.	Date 30 12
CERTIFICATE FOR THE PERSON	NS WITH DISABILITIES
The is to certify that Shri/Smt/Kum SHRTP	RAKASH SINGH
	IDK SINGH
Addras VILL - TALIBPUR, PO - H	CARMANPUR DISS-BALLIA
Age 19 Year old male/female, Registration No.	
Post branchie Ambuly	2) lowa limb below
Physically disabled/visual disabled/speech & hearing disabled	ne mon us h & fercen bled agnd has
per cent) permanent (physical impairment/visual impairment	nt/speech & hearing impairment) in relation to his/
hér	
Note:-	
1- This condition is progressive/non-progressive/like	ly to improve/not likely to improve.
2- Re-assessment is not recommended/is recommended	and the same of th
monts/years.	
Strike out which is no	t applicable.
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(DOCTOR) SD/- (DOCTOR)	B) TORN (BOCTOR)
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Boll	le / Lette
Shrifrakash Sirgh	
Signature Thumb impression of the patient	(Daniel St
Signature Thumb impression of the patient	Countersigned by the
Carried St. Completed	medial Superintendent/CMO/Head of Hospital (with seal)
O - Digital Hospital	Hospital (with seal)
Rece aph	
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