



Bharat Heavy Electricals Limited
(A Govt. of India Undertaking)
CORPORATE RESEARCH & DEVELOPMENT DIVISION,
Vikas Nagar, Hyderabad-500042
HUMAN RESOURCE MANAGEMENT

Advt No. Med. Prof -PTMC 2025 / 01

BHEL, Corporate Research & Development Division, Vikas Nagar, Hyderabad invites applications from Medical Professionals meeting the required specifications to engage them as Part Time Medical Consultants- Specialist (Orthopedics) (PTMC - ORTHO) Specialist (Psychiatry) (PTMC - Psychiatry) for the position mentioned below:-

Position Code	Position Name	Specialty/ Discipline	No. of Posts *	Qualification Requirement	Minimum Experience	Remuneration per hour (Rs.)
PTMC01	PTMC Specialist	Orthopedics	01	MD/MS/DNB	-	1200/-
PTMC02	PTMC Specialist	Psychiatry	01	MD/MS/DNB	-	1200/-

* Number of post/s are tentative and subject to upward revision of requirement by Management.

UPPER AGE LIMIT

65 years (as on 31/12/2025), relaxable up to 70 years.

TENURE

- The engagement is purely on Temporary basis for a period of One Year. Subsequent renewal(s) will be subject to satisfactory performance and at the discretion of Management.
- There will be notice period of one month, on either side, for discontinuing the part time engagement.

WORKING HOURS

PTMC- Ortho- 2 hours a visit Twice a month

PTMC- Psychiatry- 2 hours a visit Twice a month

The working hours will be as above, as per the duty Schedule / Roster decided by Medical Superintendent.

CONVEYANCE CHARGES

- In case of local travel, (up to 30 KMs one-way), conveyance charges may be given on actual basis, with the upper ceiling of Rs. 4500/- per month and beyond 30 KMs one-way, with an upper ceiling of Rs.6000/- per month on case to case basis.
- Payment towards Remuneration and Conveyance will be against submission of invoice as independent professional for rendering the services.

Contd...2

IMPORTANT INSTRUCTIONS

- Candidates applying for the above posts shall have all their Degrees (MBBS/ MD/MS/DM/DNB/PG Diploma) recognized by the Medical Council of India.
- Candidates applying for the above posts must register all their Degrees with Medical Council of India/State Medical Council.

SELECTION PROCESS

Selection process will be through walk in interview of eligible candidates, on 30.12.2025 from 9.00 hrs onwards. Candidates Attending for interview will not be paid any TA/DA.

HOW TO APPLY

Desirous candidates may download the blank application form for engagement of Part Time Medical Consultant, from BHEL website <http://careers.bhel.in> and walk-in for interview along with, their duly filled in application form along with self-attested photocopies of the following certificates.

1. DOB Proof- SSC/Intermediate Certificate
2. MBBS Certificate
3. MD/DM/MS/DNB/PG Diploma Certificate (if applicable).
4. Registration Certificate for MBBS issued by Medical Council of India or by a State Medical Council.
5. Registration Certificate for MD/MS/DM/DNB/ PG Diploma issued by Medical Council of India /State Medical Council (if applicable).
6. Proof of Experience (if applicable) - Preferably an Experience Certificate on letter head from an Organization/Hospital issued by a Competent Authority.
7. No Objection Certificate: Persons employed in Govt./Semi-Govt./ Public Sector Undertakings/ Autonomous bodies should apply through Proper Channel.

IMPORTANT INSTRUCTIONS

- BHEL reserves the right to reschedule/cancel/suspend/terminate the process without assigning any reasons and alter the terms and conditions at any time due to any exigency. The decision of the management will be final and no appeal will be entertained.
- No correspondence will be entertained with the candidates not selected for Appointment.
- Corrigendum/extension and any other information etc., if any, shall be published in our website <https://careers.bhel.in>.
- **Important Dates:**

Milestones	Scheduled Date & Time/Place
Commencement of WALK-IN Interviews	30/12/2025- 09.00 HRS/ 2 nd floor - Admin building



BHARAT HEAVY ELECTRICALS LIMITED
CORPORATE RESEARCH & DEVELOPMENT, DIVISION
VIKAS NAGAR, HYDERBAD - 500042

PLEASE AFFIX
PASSPORT SIZE
PHOTOGRAPH SELF
ATTESTED

BIO DATA FORM FOR WALK-IN INTERVIEW
FOR SELECTION AS PART TIME MEDICAL CONSULTANT

Advertisement No. Advt No. Med. Prof -PTMC 2025 / 01

1. POST APPLIED FOR:

PTMC01- PTMC (Ortho)

2. NAME (IN CAPITAL LETTERS AS PER HIGH SCHOOL CERTIFICATE)

3. FATHER'S NAME

4. DATE OF BIRTH
(dd/mm/yyyy)

5. AGE (in years & months
as on 01.04.2024)

6. CATEGORY (GEN/SC/ST/OBC/EWS)

7. NATIONALITY

8. PHYSICALLY CHALLENGED? YES / NO

IF YES (VH/OH/HH)

% AGE

9. EX-SERVICEMAN?

YES / NO

YEARS OF SERVICE

10. ADDRESS FOR CORRESPONDENCE

.....

.....

City:....., District:.....

State:....., PIN:.....

11. EDUCATIONAL QUALIFICATIONS

QUALIFICATION	College/ University	Full Time/ Part Time	Specialisation	PERIOD (FROM- TO)	YEAR OF PASSING	MARKS OBTD./ MAX. MARKS	% of MARKS	Whether Recognised by MCI
MBBS								
INTERNSHIP								--NA--
MD/MS/ DNB/ DMRD/DPM								
PG DIPLOMA								
OTHERS								

12. EXPERIENCE DETAILS

NAME OF ORGANISATION AND ADDRESS	PRIVATE / GOVT / SEMI GOVT / OTHER	TYPE OF ENGAGEMENT (REGULAR / CONTRACT / AD HOC / PRIVATE PRACTICE)	DESIGNATION/ AREA OF WORK	PERIOD FROM	PERIOD TO

13. Registration Certificate of Medical Council of India or, State Medical Council
Certificate No.....dated.....
 Valid upto

14. Have you applied for any other vacancies somewhere else currently : YES / NO

If yes, please give name of the employer/organization and date for selection process and its current status

.....

15. Have/has your parent(s)/spouse been in service of BHEL? **YES / NO**

If yes, please furnish details

a. status of employment
(Serving / Retired / death during service /
death after service)

B. Staff Number & Unit

16. Phone number / Mobile No.

EMAIL I.D.

DECLARATION

I hereby declare that statements made by me in this bio data form are true and complete. If I am engaged and the company finds at any time that any part of the information given by me is incorrect and false or that I have concealed any relevant information, I agree that my engagement shall be liable to be terminated summarily without any notice or compensation.

DATE.....

SIGNATURE.....

PLACE.....

NAME.....



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VIKAS NAGAR, HYDERBAD - 500042

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FOR SELECTION AS PART TIME MEDICAL CONSULTANT

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3. POST APPLIED FOR:

4. NAME (IN CAPITAL LETTERS AS PER HIGH SCHOOL CERTIFICATE)

3. FATHER'S NAME

4. DATE OF BIRTH (dd/mm/yyyy) 5. AGE (in years & months as on 01.04.2024)

6. CATEGORY (GEN/SC/ST/OBC/EWS) 7. NATIONALITY

16. PHYSICALLY CHALLENGED? YES / NO IF YES (VH/OH/HH) % AGE

17. EX-SERVICEMAN? YES / NO YEARS OF SERVICE

18. ADDRESS FOR CORRESPONDENCE
.....
.....
City:....., District:.....
State:....., PIN:.....

19. EDUCATIONAL QUALIFICATIONS

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MBBS								
INTERNSHIP								--NA--
MD/MS/ DNB/ DMRD/DPM								
PG DIPLOMA								
OTHERS								

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21. Registration Certificate of Medical Council of India or, State Medical Council
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22. Have you applied for any other vacancies somewhere else currently : YES / NO

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DATE.....

SIGNATURE.....

PLACE.....

NAME.....