**index.html**

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

<meta name="viewport" content="width=device-width, initial-scale=1.0">

<meta http-equiv="X-UA-Compatible" content="ie=edge">

<title>Registration Form</title>

</head>

<body>

<h1>Registration Form</h1>

<hr>

<form>

<label for="firstname">First Name\*</label>

<input type="text" name="firstname" id="firstname" required />

<br>

<label for="lastname">Last Name\*</label>

<input type="text" name="lastname" id="lastname" required />

<br>

<label for="email">Email</label>

<input type="email" name="email" id="email" />

<br>

<label for="mobileno">Mobile No.</label>

<input type="text" name="mobileno" id="mobileno" pattern="[0-9]{10}" maxlength="10" />

<br>

<label for="age">Age\*</label>

<input type="number" name="age" id="age" max="120" min="1" required />

<br>

<label for="gender">Gender\*</label>

<input type="radio" name="gender" id="gender" value="Male" required />Male

<input type="radio" name="gender" id="gender" value="Female" required />Female

<input type="radio" name="gender" id="gender" value="Other" required />Other

<br>

<label for="college">College Name\*</label>

<input type="text" name="college" id="college" required />

<br>

<label for="semester">Semester\*</label>

<select name="semester" id="semester" required>

<option value="1">1</option>

<option value="2">2</option>

<option value="3">3</option>

<option value="4">4</option>

<option value="5">5</option>

<option value="6">6</option>

<option value="7">7</option>

<option value="8">8</option>

</select>

<br>

<input type="submit" value="Submit" />

</form>

</body>

</html>

