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public\index6.html

```
<!DOCTYPE html>
 2
    <html>
 3
        <head>
            <title> Buspass Application</title>
 4
 5
            <body>
 6
                <form>
 7
                    <center>
 8
                 <img src=".\Tsrtc.logo1.jpg"</pre>
                 width="100px"
 9
                 height="100px">
10
11
                </center>
12
              <center><h2><ins>TELANGANA STATE ROAD TRANSPORT CORPORATION</ins></h2></center>
13
              <center><h3>STUDENT BUS PASS APPPLICATION UPTO SSC</h3></center>
              <br/>
14
15
              <h3><b>1.STUDENT DETAILS:</b></h3>
16
              <br/>
17
               <b>1.1 Name:</b><span><input type="text" name="Name:" id="Name"/></span>&nbsp<b> 1.2 Father's Name:</b><span>
    <input type="text" name="Name:" id="Name"/></span> <br/>
               <br/>
18
19
               <br/>
20
21
               <br/>
<br/>
1.3 DOB:</b><lable for="DOB"></lable>
               <input type="date" name="DOB" id="DOB"/>&nbsp;
22
23
               <b>1.4 Gender:</b><span> <input type="radio" name="Gender" id="Male"/></span><label for="Male">Male</label>
               <span> <input type="radio" name="Gender" id="female"/></span><label for="female">female</label>
24
25
               <span> <input type="radio" name="Gender" id="Others"/></span><label for="Others">Others</label>
               <br/>
26
               <br/>
27
28
               <br/>
29
               <b>1.5 AAdhar No:</b><input type="text" name="Name: id="Name"/> &nbsp;<span><b>1.6 Mobile No:</b><input type="text"
    name="Name:" id="Name"/></span><br/><br/><br/>
               <b>1.7 Email:<input type="text" name="Name: id="Name"/></b>&nbsp; <span>
30
                <br/><b>Is employee Children:</b><span><input type="radio" name="Yes" id="Yes"></span>
31
32
                <span><label for="Yes">Yes</label></span>
               <span> <input type="radio" name="No" id="No"/>
33
                <label for="No">No</label></span>
34
35
               </span>
36
               <br/>
37
               <br/>
```

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```
<br/>
<b>1.8 Photos: </b> <input type="file" name="file" id="file"/>
38
39
               <label for="file"></label> <br/> <br/>
40
               <h3>2.RESIDENTIAL ADDRESS DETAILS:</b></h3>
               <b>2.1 Distric: <input type="text" name="Name:" id="Name"/></b>&nbsp;<span><b>2.2 Mandal:</b>:<input type="text"
41
    name="Name:" id="Name"/></b></span> <br/> <br/> <br/>
42
               <b>2.3 Village: :<input type="text" name="Name:" id="Name"/></b>&nbsp;<span><b>2.4: Address</b>
43
                <label for="Address">Addres</label>
                <textarea name="Addres" id="Addres" rows="6" cols="30"></textarea><br/>><br/>>
44
45
                <b>2.5 Postal Code :<input type="text" name="Name:" id="Name"/></b>:</b>:</b><br/>
46
47
            </span>
48
            <h3><b>3.SCHOOL DETAILS:</b></h3>
            <b>3.1 Distric: <input type="text" name="Name:" id="Name"/></b>&nbsp;<span><b>3.2 Mandal:</b>:<input type="text"
49
    name="Name:" id="Name"/></b></span> <br/> <br/>
            <b>3.3 School Name:</b><input type="text" name="Name:" id="Name"/>&nbsp;<span><b> 3.4 Class</b><input type="text"
50
    name="Name:" id="Name"/></span>
51
            3.4: School Address</b>
52
                <label for=" School Address">Addres</label>
53
                <textarea name=" School Addres" id=" School Addres" rows="6" cols="30"></textarea><br/>br/><br/>
54
                <h3><b>4.ROUTE DETAILS:</b></h3>
55
                <b>4.1 At which center you want to collect ID PASS:</b><input type="text" name="Name: id="Name"/> &nbsp; <span><b>
    4.2 pass type:</b>
                    <label for="pass type"></label>
56
                    <select name="Pass type" id="pass type">
57
                        <option> Quarterly</option>
58
59
                        <option> Half yearly
                        <option>Yearly</option>
60
61
62
                </span>
63
                <br/>
                <br/>
64
65
                <h3><b>5.MODE OF PAYMENT&PASS COOLECTION:</b></h3>
66
67
             <label for="payment method"></label>
                        <select name="payment method" id="paymentmethod">
68
                            <option>UPI</option>
69
70
                        <option> At center
71
                        <option>Card payments
72
73
74
                </span>
75
76
```

```
77 | 78 | 79 | 80 | 81 | 82 | 83 | </form> 84 | </body> 85 | </head> 86 | </html>
```