<!DOCTYPE html>

<html lang="en">

<head>

    <meta charset="UTF-8">

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

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

    <title>Document</title>

</head>

<body style="background-color:rgb(232, 197, 132);">

    <header>

        <nav class="navbar navbar-expand-lg navbar-dark" style="background-color: #660000;">

            <a class="navbar-brand d-lg-none" href="https://www.alliance.edu.in/"><img src="https://www.alliance.edu.in/siteassets/logo.svg"></a>

</header>

<section class="notysect"  style="background-color: #5b5050;">

    <div class="container">

        <div class="notfy">

            <div class="row">

                <div class="col-md-1 wow fadeInLeft animated" style="visibility: visible;">

                    <h5 class="notfy-head" style="color: beige;">Notifications</h5>

                    <marquee behavior="scroll" direction="left" onmouseover="this.stop();" onmouseout="this.start();">

                    <ul>

                                                <li><a target="\_blank" href="#" style="color: beige;">View the Alliance Literary Festival 2022 Gallery</a></li>

                                                <li><a target="\_blank" href="https://www.alliance.edu.in/uploads/pdf/FDP-on-Marketing-Research-Methods-Using-R.pdf" style="color: beige;">FDP on Marketing Research Methods Using R</a></li>

                                            </ul>

                    </marquee>

                </div>

            </div>

        </div>

    </div>

</section>

    <h1 align=center>Alliance College of Engineering and Design</h1>

    <h3 align=center font-size:"5"> Welcome you All</h3>

    <h3 align=center> Anekal, bengaluru </h3></br>

    <hr>

    <h1 align="center"> College Registraton Form</h1>

    <table border="0" align="center">

        <tr>

            <th colspan="2">Student Form Registraton</th>

        </tr>

        <tr>

            <td><label for="un">NAME </label>

            <td> <input type=text name"tun" placeholder="Enter your name" size="50">

        </tr>

        <td> <label for="un\\pwd">FATHER NAME </label> </td>

        <td> <input type=text name"tpd" placeholder="Enter your father name " size="50"></td>

        </tr>

        <td><label for="un">MOTHER NAME: </label></td>

        <td> <input type=text name"tpd" placeholder="Enter your mother name " size="50"> </td>

        </tr>

        <td><label for="un">Address: </label></td>

        <td> <textarea  style="width: 340px; height: 34px;"></textarea> </td>

        </tr>

        <td><label for="un">Pre School name: </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Pre school registration number: </label></td>

        <td> <input type=text name"tpd" placeholder="Enter your registration number " size="50"> </td>

        </tr>

        <td><label for="un">PU College name: </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">PU College registration number: </label></td>

        <td> <input type=text name"tpd" placeholder="Enter your registration number " size="50"> </td>

        </tr>

        <td><label for="un">Aadhar number: </label></td>

        <td> <input type=text name"tpd" placeholder="Enter your Aadhar number " size="50"> </td>

        </tr>

        <td><label for="un">Country : </label></td>

        <td> <input type="radio" name="tr1" value="YES">IND

            <input type="radio" name="tr1" value="NO">OTHER

        </td>

        </tr>

        <td><label for="un">Select state : </label></td>

        <td> <select name="state" id="state" class="form-control">

            <option value="Andhra Pradesh">Andhra Pradesh</option>

            <option value="Andaman and Nicobar Islands">Andaman and Nicobar Islands</option>

            <option value="Arunachal Pradesh">Arunachal Pradesh</option>

            <option value="Assam">Assam</option>

            <option value="Bihar">Bihar</option>

            <option value="Chandigarh">Chandigarh</option>

            <option value="Chhattisgarh">Chhattisgarh</option>

            <option value="Dadar and Nagar Haveli">Dadar and Nagar Haveli</option>

            <option value="Daman and Diu">Daman and Diu</option>

            <option value="Delhi">Delhi</option>

            <option value="Lakshadweep">Lakshadweep</option>

            <option value="Puducherry">Puducherry</option>

            <option value="Goa">Goa</option>

            <option value="Gujarat">Gujarat</option>

            <option value="Haryana">Haryana</option>

            <option value="Himachal Pradesh">Himachal Pradesh</option>

            <option value="Jammu and Kashmir">Jammu and Kashmir</option>

            <option value="Jharkhand">Jharkhand</option>

            <option value="Karnataka">Karnataka</option>

            <option value="Kerala">Kerala</option>

            <option value="Madhya Pradesh">Madhya Pradesh</option>

            <option value="Maharashtra">Maharashtra</option>

            <option value="Manipur">Manipur</option>

            <option value="Meghalaya">Meghalaya</option>

            <option value="Mizoram">Mizoram</option>

            <option value="Nagaland">Nagaland</option>

            <option value="Odisha">Odisha</option>

            <option value="Punjab">Punjab</option>

            <option value="Rajasthan">Rajasthan</option>

            <option value="Sikkim">Sikkim</option>

            <option value="Tamil Nadu">Tamil Nadu</option>

            <option value="Telangana">Telangana</option>

            <option value="Tripura">Tripura</option>

            <option value="Uttar Pradesh">Uttar Pradesh</option>

            <option value="Uttarakhand">Uttarakhand</option>

            <option value="West Bengal">West Bengal</option>

            </select>

        </td>

        </tr>

        <tr><th>

</th></tr>

        <td><label for="un">PIN code: </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Email: </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Mobile number : </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Parents Mobile number : </label></td>

        <td> <input type=text name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Date of Birth: </label></td>

        <td> <input type="date" name"tpd" placeholder="" size="50"> </td>

        </tr>

        <td><label for="un">Sex: </label></td>

        <td> <input type="radio" name="tr1" value="Male">Male

            <input type="radio" name="tr1" value="female">female

        </td>

        </tr>

        <td><label for="un">Language: </label></td>

        <td> <input type="checkbox" name"tb1" value=""> Hindi

            <input type="checkbox" name"tb1" value="">Kannada

            <input type="checkbox" name"tb1" value="">Other's

        </td>

        </tr>

        <td><label for="un">Upload Required Documents : </label></td>

        <td> <input type="file" name"tpd" placeholder=" Choose File" size="50"> </td>

        </tr>

        <td><label for="un">About: </label></td>

        <td> <textarea rows="5" cols="30" style="width: 340px; height: 78px;"></textarea> </td>

        </tr>

        <td><label for="con">Select Branch: </label></td>

        <td> <select country="s">

                <option value="CSE">CSE</option>

                <option value="IT">IT</option>

                <option value="MECH">MECH</option>

                <option value="ECE">ECE</option>

                <placeholder="Please select a Country">

                    </option>

        </td>

        </tr>

        <tr><th></th></tr>

        <tr><th></th></tr>

        <tr><th></th></tr>

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        <tr><th></th></tr>

        <tr><th></th></tr>

        <td><button style="color: blue;"> Submit</button></td>

        </tr>

    </table>

</body>

</html>