Name - Manmohan Singh Rana
Father Name - Kharak singh Rana
On Roll No - 21711204
Class Roll No - 49
Course - MCA
Semester - 1st
Paper Name - dl practical exam
Paper code - PMC·103

```html
<!DOCTYPE html>
<html>
<head>
<title> Employee Registration </title>
</head>
<br><br><br><br><b>
<h1 align = "center"><u>Employee Registration </u></h1>
<form method = "get"   action = "employeeinfo.html">
<table align= "center">
    <tr>
        <td><label> User id </label></td>
        <td><input type= "text"    name= "uname" required></td>
    </tr>
    <tr>
        <td><label> Password  </label></td>
        <td><input type= "password" required ></td>
    </tr>
    <tr>
        <td colspan= "2"   align= "cente"><input class= "submit"
        type = "submit"   value = "login" ></td>
    <tr>
</table>
</form>
</body>
</html>
```

Employee Information

```html
<!DOCTYPE html>
<html>
<head>
<title> Employee information</title>
</head>
<body>
<h1 align="center"><u> Employee information</u></h1>
<form>
<table align="center">
    <tr>
        <th><label> Name </label></th>
        <td><input type="text"></td>
    </tr>
    <tr>
        <th><label> Phone number </label></th>
        <td><input type="number"></td>
    </tr>
    <tr>
        <th><label> Gender </label></th>
        <td><input type="radio" value="male" name="gender">male
        <input type="radio" value="Female" name="gender">Female
    </tr>
    <tr> <th><label> Date of birth'</label></th>
        <td><input type="date" id="dob" name="dob"></td>
    </tr>
```

```html
<tr>
    <th> Upload document</th>
    <td><input type="file" id="mylile" name="filename"></td>
</tr>
<tr>
    <td colspan="2" align="center"><input type="submit"></td>
</tr>
</table>
</form>
</body>
</html>
```