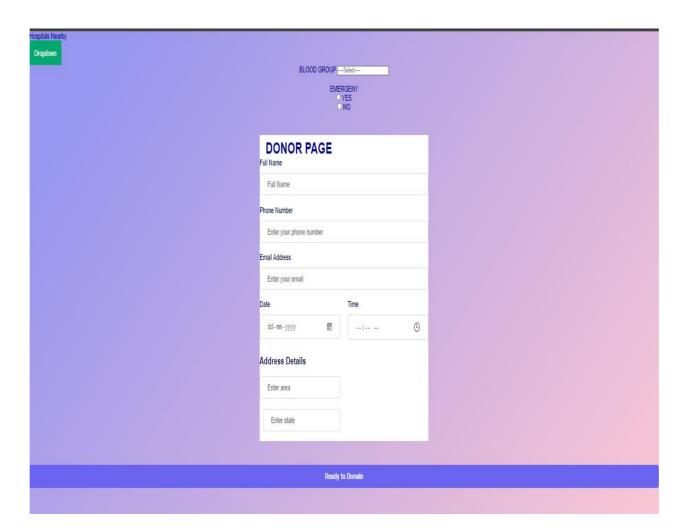
PROJECT DEVLOPMENT PHASE SPRINT 2

TEAM ID	PNT2022TMID45809
PROJECT NAME	PLASMA DONOR APPLICATION

PLASMA DONOR:



PLASMA SEEKER:

Welcome!!Connect with complete care		
*Note: All fields are required.		ı
PATIENT DETAILS		ı
Enter Patient name First Name		ı
Enter Hospital name Hospital Name		ı
Enter Doctor name you are under treatment Doctor Name		ı
Choose your blood group: O negative When Required? dd - mm - yyyy □		ı
Is it Emergency? • YES • NO		
Add description if any!		ı
type here		ı
		ı
CONTACT DETAILS		ı
Enter contact number contact number		ı
Enter email id Email Address		ı
Choose city: < City v		ı
Upload your personal photo: Choose File No file chosen		
□ Do you agree to the terms and conditions?		
Place Request Reset Request	١,	w