

Create a form with HTML and CSS.

```
<!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>Google Form</title>

</head>

<body>

  <h1 style="Color:Blue;text-decoration:underline;">JOB RECRUITMENT FORM</h1>

  <form action="signupresult.html" enctype="multipart/form-data">

    <div>

      <label for="First Name">First name</label>

      <input type="text" name="First Name" id="First Name" placeholder="Enter your firstname..."
required>

    </div>

    <br>

    <br>

    <div>

      <label for="Last Name">Last Name</label>

      <input type="text" name="Last Name" id="Last Name" placeholder="Enter your lastname..."
required>

    </div>

    <br>

    <br>
```

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<div>

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

  <input type="email" name="email" id="email" placeholder="Enter your email address..."
required>

</div>

<br>

<br>

<div>

  <label for="password">Password</label>

  <input type="password" name="password" id="password" placeholder="Enter your password..."
required>

</div>

<br>

<br>

<div>

  <label for="phone number">phone number</label>

  <input type="tel" name="phone number" id="phone number" placeholder="Enter your phone
number..." Maxlength="10" required>

</div>

<br>

<br>

<div>

  <label for="Date Of Birth">Date Of Birth</label>

  <input type="date" name="Date Of Birth" id="Date Of Birth" placeholder="Enter your Date Of
Birth..." min="1999-01-01" max="2005-01-01" required>

</div>

<br>
```

<br>

<div>

<label for="about yourself">About yourself</label>

<textarea name="about yourself" id="about yourself" cols="10" rows="5" required>About  
Me</textarea>

</div>

<br>

<br>

<div>

<input type="checkbox" name="assurance" id="assurance" required>

<label for="assurance">I agree to the terms and conditions</label>

</div>

<br>

<br>

<div>

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

<label for="Male">Male</label>

</div>

<br>

<br>

<div>

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

<label for="Female">Female</label>

</div>

<br>

<br>

```
<div>

  <label for="state">state</label>

  <select name="state" id="state">

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

    <option value="Andhrapradesh">Andhrapradesh</option>

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

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

  </select>

</div>

<br>

<br>

<div>

  <label for="Resume">Resume</label>

  <input type="file" name="Resume" id="Resume" required>

</div>

<button>submit</button>

  </form >

</body>

</html>
```

Name:Lavanya.S

Reg.no: 20BEC0648



## JOB RECRUITMENT FORM

First name

Last Name

email

Password

phone number

Date Of Birth

About yourself 

About Me

☐ I agree to the terms and conditions

☐ Male

☐ Female

state

Resume  No file chosen