Forms with validation in HTML

```
<!DOCTYPE html>
<html>
   <head>
       <title>student form</title>
   </head>
   <body>
       <h1>Student Registration Form</h1>
       <fieldset style="width: 60%;">
       <fieldset style="width: 60%;">
           <legend align="center">Student Details</legend>
           <form>
               <label for="name">First name:</label>
               <input type="text" id="name" name="name" value=""</pre>
Pattern="[a-zA-Z]+" minlength="3" maxlength="20" placeholder="enter your
firstname" required> <br><br>>
               <label for="name1">Last name:</label>&nbsp;
               <input type="text" id="name1" name="name" value=""</pre>
Pattern="[a-zA-Z]+" minlength="3" maxlength="20" placeholder="enter your
lastname" rewuired> <br><br>>
               <label for="name2">Guardian:</label> &nbsp;&nbsp;
               <input type="text" id="name2" name="name" value=""</pre>
Pattern="[a-zA-Z]+" minlength="3" maxlength="20" placeholder="enter your
gurdian name" required>
           </form>
       </fieldset>
                               
bsp;           
       <fieldset style="width: 60%;">
       <legend align="center">Student Contact Details</legend>
           <form>
               <label for="phone">Mobile
Number:</label>&nbsp;&nbsp;&nbsp;
               <input type="tel" id="phone" name="phone" value=""</pre>
pattern="[0-9]{10}" placeholder="7778889997" required> <br><br>
               <label for="email">Email
Id:</label>&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;&nbsp;
sp;
```

```
<input type="email" id="email" name="email" value=""</pre>
pattern="^[A-Za-z0-9. %+-]+@gmail\.com$" placeholder="abcd23@gmail.com"
required>
          </form>
       </fieldset>
                               
bsp;          
       <fieldset style="width: 60%;">
          <legend align="center">Graduation Details</legend>
          <form>
              <label</pre>
for="ssc">SSC</label>&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
;          
              <input type="checkbox" id="ssc" name="education"</pre>
value="ssc"><br>
              <label for="inter">Intermediate</label> &nbsp;
              <input type="checkbox" id="inter" name="education"</pre>
value="intermediate"><br>
              <label
for="degree">Degree</label>&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp
;      
              <input type="checkbox" id="degree" name="education"</pre>
value="degree">
          </form>
       </fieldset>
       <br><br>>
       <label for="file">upload your image:</label>
       <input type="file" id="file" name="image" value="image">
       <br><br><br>>
       <label for="resume">upload your resume:</label>
       <input type="file" id="resume" name="resume" value="resume">
       <br><br>>
       <label for="salary">Range for Salary Expectations:</label>
       <input type="range" id="salary" name="salary" value="salary"</pre>
oninput="out.value=this.value" min="30000" max="50000">
       <output id="out"></output><br><br>
       <label for="msg">Comments:</label>
```

Output:

