

# Student form

## Personal information

Name:	<input type="text" value="Enter your name"/>
Email:	<input type="text" value="Enter your email"/>
Password:	<input type="password" value="Enter your password"/>
Gender:	<input type="radio"/> Male <input type="radio"/> Female
Hobbies:	<input type="checkbox"/> Reading <input type="checkbox"/> Travelling <input type="checkbox"/> Singing <input type="checkbox"/> Sports <input type="checkbox"/> Dancing
Address:	<input type="text" value="Enter your address"/>