1prg

<html>

<head>

<title>Student Registration Form</title>

<style>

.form-container {

    max-width: 600px;

    margin: 20px auto;

    background-color:gray;

    padding: 20px;

    border-radius: 8px;

    /\* box-shadow: 0 0 5px; \*/

}

.form-heading {

text-align: center;

}

</style>

</head>

<body>

<div class="form-container">

<h2 class="form-heading">Student Registration Form</h2>

<form id="studentForm" action=" ">

<table style="width: 100%;">

<tr>

<td><label>First Name:</label></td>

<td><input type="text" name="firstName" required></td>

</tr>

<tr>

<td><label>Last Name:</label></td>

<td><input type="text" name="lastName" required></td>

</tr>

<tr>

<td><label>Roll No. :</label></td>

<td><input type="text" name="rollNo" required></td>

</tr>

<tr>

<td><label>Email ID:</label></td>

<td><input type="email" name="email" required placeholder="enter the email"></td>

</tr>

<tr>

<td><label>Mobile Number:</label></td>

<td><input type="tel" name="mobile" required placeholder="enter the mob"></td>

<tr>

<td><label>Gender:</label></td>

<td>

<select name="gender" required>

<option>Select</option>

<option>Male</option>

<option>Female</option>

</select>

</td>

<tr>

<td><label>Date of Birth:</label></td>

<td><input type="date" name="dob" required></td>

<tr>

<td><label>Address:</label></td>

<td><textarea name="address" rows="4"  required></textarea></td>

</tr>

</table>

<div align="center">

<input type="submit" value="Submit">

<input type="reset" value="Reset">

</div>

</form>

</div>

</body>

</html>