**#Name:Prachi Phulari**

**#Class:SY-II**

<!DOCTYPE html>

<html lang="en">

<head>

    <meta charset="UTF-8">

    <meta name="viewport" content="width=device-width, initial-scale=1.0">

    <title>Document</title>

</head>

<P></P><h1>Student Informaton Form..!</h1></P>

<body>

    <form>

    <h3>select your class</h3>

    <label for="id1">

        <input type="radio"value="class SYI"name="class">class SYI<br><br>

    </label>

    <label for="id1">

        <input type="radio"value="class SYII"name="class">class SYII<br>

    </label><br><br>

    <br>

    <label for="fname"><strong>First name:</strong></label><br>

    <input type="text" id="fname" name="fname"><br><br>

    <label for="mname"><strong>middle name:</strong></label><br>

    <input type="text" id="mname" name="mname"><br><br>

    <label for="lname"><strong>Last name:</strong></label><br>

    <input type="text" id="lname" name="lname"><br>

  </form><br><br>

  <br>

  <h3>select your Subjects</h3>

  <label for="Daa">

    <input type="checkbox" value="Daa" name=""subject" id="101">Daa

  </label><br><br>

  <label for="PTRP">

    <input type="checkbox" value="PTRP" name=""subject" id="102">PTRP

  </label><br><br>

  <label for="Python">

    <input type="checkbox" value="Python" name=""subject" id="102">Python

  </label><br><br>

  <label for="CSS">

  <input type="checkbox" value="CSS" name=""subject" id="102">CSS

</label><br><br>

<label for="Seminar II">

<input type="checkbox" value="Seminar II" name=""subject" id="102">Seminar II

</label><br><br>

<label for="BHR">

    <input type="checkbox" value="BHR" name=""subject" id="102">BHR

    <label for="CI"><br><br>

        <input type="checkbox" value="CI" name=""subject" id="101">CI

      </label><br><br>

      <label for="Html">

        <input type="checkbox" value="Html" name=""subject" id="101">Html

      </label><br><br>

  </label><br><br>

  <button>click me!</button>

</body>

</html>

//OUTPUT:



