<html>

<head>

<title>

Form

</title>

</head>

<body>

<center><h1>Student Form</h1></center>

<form>

<label> First name: </label>

<input type="text" name="firstname" /> <br> <br>

<label> Last name: </label>

<input type="text" name="lastname" /> <br> <br>

<label> Roll No: </label>

<input type="text" name="rollno" /> <br> <br>

<label> Division:</label><br>

<input type="radio" value="A" name="division"> A

<input type="radio" value="B" name="division"> B <br><br>

<label> Phone No: </label>

<input type="text" name="phone" /> <br> <br>

<label> Email Id: </label>

<input type="email" id="email" name="email"/> <br><br>

<input type="button" value="Submit"/>

</form>

</body>

</html>

