<br/>

<h1 class="text-center" style="font-weight: 500;">Add Student </h1>

<br/>

<div class="row">

  <div class="col-4">

    <div class="form-group">

      <label >Id</label>

      <input type="text"  class="form-control"  placeholder="Id">

    </div>

              <div class="form-group row ">

                <div class="col-12 mt-3">

             <select name ="Country" class="form-control" >

             <option selected value="-1" translate>Select Country</option>

             <option >Pakistan</option>

             <option >Iran</option>

             </select>

              </div>

            </div>

    </div>

    <div class="col-4">

      <div class="form-group ">

        <label class="label-control" >Name</label>

        <input type="text"  class="form-control"  placeholder="Name">

      </div>

      <div class="form-group mt-3">

        <label>Gender</label>

        <br/><div class="mt-2">

                  <div class="form-check form-check-inline">

                    <input class="form-check-input"   type="radio" name="gridRadios" id="gridRadios1"   value="Male">

                    <label class="form-check-label" for="gridRadios1">Male</label>

                  </div>

                  <div class="form-check form-check-inline">

                    <input class="form-check-input"   type="radio" name="gridRadios" id="gridRadios2" value="Female">

                    <label class="form-check-label" for="gridRadios2">Female</label>

                  </div>

                </div>

      </div>

    </div>

    <div class="col-4">

      <div class="form-group ">

        <label>Date of birth</label>

        <input type="date"   class="form-control"  placeholder="Name">

      </div>

                <div class="form-group row mt-3  ">

                  <label style="margin-left:15px" >Degree</label>

                  <div class="col-12 mt-2">

                            <div class="form-check form-check-inline">

                              <input class="form-check-input"  type="checkbox" name="fsc" id="a1" value="fsc">

                              <label class="form-check-label" for="a1">FSC</label>

                            </div>

                            <div class="form-check form-check-inline">

                              <input class="form-check-input" type="checkbox" name="inlineRadioOptions4" id="inlineRadio4" value="bscs">

                              <label class="form-check-label" for="inlineRadio4">BSCS</label>

                            </div>

                          </div>

                </div>

    </div>

<!-- row ed div  -->

</div>

<br/>

<div class="row  ">

  <div class="offset-11 col-1 " >

    <button class="btn btn-primary float-right"  >Save</button>

    </div>

</div>