

Job Application Form

Basic Detail

First Name	<input type="text"/>	last name	<input type="text"/>
Designation	<input type="text"/>	Address 1	<input type="text"/>
Email	<input type="text"/>	Address 2	<input type="text"/>
Phone Number	<input type="text"/>	City	<input type="text"/>
Gender	<input type="radio"/> male <input type="radio"/> Female	State	<input type="text" value="Gujarat"/>
RelationShip Status	<input type="text" value="single"/>	Zip code	<input type="text"/>
		Date Of Birth	<input type="text" value="//"/> <input type="text" value=""/>

Education Detail

SSC result			
Name Of board	<input type="text"/>	Passiong Year	<input type="text"/>
		Percentage	<input type="text"/>
HSC/Diploma Result			
Name Of board	<input type="text"/>	Passiong Year	<input type="text"/>
		Percentage	<input type="text"/>
bachelor degree			
Course Name	<input type="text"/>	University	<input type="text"/>
		Passiong Year	<input type="text"/>
		Percentage	<input type="text"/>
Master Degree			
Course Name	<input type="text"/>	University	<input type="text"/>
		Passiong Year	<input type="text"/>
		Percentage	<input type="text"/>

Work Experience

Company name	<input type="text"/>	Designation	<input type="text"/>	From	<input type="text" value="//"/> <input type="text" value=""/>	To	<input type="text" value="//"/> <input type="text" value=""/>
Company name	<input type="text"/>	Designation	<input type="text"/>	From	<input type="text" value="//"/> <input type="text" value=""/>	To	<input type="text" value="//"/> <input type="text" value=""/>
Company name	<input type="text"/>	Designation	<input type="text"/>	From	<input type="text" value="//"/> <input type="text" value=""/>	To	<input type="text" value="//"/> <input type="text" value=""/>

Language KNown

<input type="checkbox"/> Hindi	<input type="checkbox"/> read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
<input type="checkbox"/> English	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
<input type="checkbox"/> Gujarati	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak

Technologies youo know

<input type="checkbox"/> PHP	<input type="radio"/> Beginer	<input type="radio"/> Mideator	<input type="radio"/> Expert
<input type="checkbox"/> Mysql	<input type="radio"/> Beginer	<input type="radio"/> Mideator	<input type="radio"/> Expert
<input type="checkbox"/> larave	<input type="radio"/> Beginer	<input type="radio"/> Mideator	<input type="radio"/> Expert
<input type="checkbox"/> Oracle	<input type="radio"/> Beginer	<input type="radio"/> Mideator	<input type="radio"/> Expert

Reference Contact

Name	<input type="text"/>	Contact Number	<input type="text"/>	Relation	<input type="text"/>
Name	<input type="text"/>	Contact Number	<input type="text"/>	Relation	<input type="text"/>

Preferences

Preferd location	<div>Item One Item Two Item Three</div>	Notice period	<input type="text"/>	Department	<input type="text" value="Development"/>
		Expacted CTC	<input type="text"/>		<input type="text" value="Design marketing"/>
		Current CTC	<input type="text"/>		