

Question 2: Create an HTML code that collects the following student details: name, email, date of birth, gender, and course, address, phone and photo. Use the table tag to organize the form elements.

```
<!DOCTYPE html>
<html>
<head>
    <title>Student Details Form</title>
</head>
<body>
    <h1>Student Details Form</h1>
    <form>
        <table>
            <tr>
                <td>Name:</td>
                <td><input type="text" name="name" required></td>
            </tr>
            <tr>
                <td>Email:</td>
                <td><input type="email" name="email" required></td>
            </tr>
            <tr>
                <td>Date of Birth:</td>
                <td><input type="date" name="dob" required></td>
            </tr>
            <tr>
                <td>Gender:</td>
                <td>
                    <input type="radio" name="gender" value="male" required>Male
                    <input type="radio" name="gender" value="female" required>Female
                </td>
            </tr>
            <tr>
                <td>Course:</td>
                <td>
                    <select name="course" required>
                        <option value="">Select a course</option>
                        <option value="CSE">CSE</option>
                        <option value="AIML">AI&ML</option>
                        <option value="CSD">CSD</option>
                        <option value="ISE">ISE</option>
                    </select>
                </td>
            </tr>
            <tr>
                <td>Address:</td>
                <td><textarea name="address" rows="5" cols="30"></textarea></td>
            </tr>
        </table>
    </form>
</body>
</html>
```

```

<tr>
  <td>Phone:</td>
  <td><input type="tel" name="phone" pattern="[0-9]{10}" required></td>
</tr>

  <tr>
    <td>Photo:</td>
    <td><input type="file" name="photo"></td>
  </tr>

<tr>
  <td colspan="2" align="center"><input type="submit" value="Submit"></td>
</tr>
</table>
</form>
</body>
</html>

```

Output

Student Details Form

Name:

Email:

Date of Birth: mm / dd / yyyy



Gender:

☐ Male ☐ Female

Course:

Select a course ▾

Address:

Phone:

Photo:

Choose File No file chosen

Submit