Solution: Required form:

<html>

<head>

<title>shiva infotech pvt</title>

<html>

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<script>

function shiva(){

var x = document.getElementById("password").value;

var y = document.getElementById("confirm password").value;

var w=document.getElementById("mobile").value;

if(w.length!=10)

{alert("Invalid Mobile number")

return false;}

if (x != y) {

alert("Password do not match");

return false;

}

return true;

}

function shiva1(){var u=document.getElementById("secondary password").value;

if(u<3)

{alert("Secondary password must greater than 3 digits");

return false;}

return true;}

</script>

</head>

<body>

<div style="background-color:blue"><table align="center" ><tr><th><h2 align ="center"> SMTD Infotech </h2></tr></th><br><tr><th><h3 align="center">SMTD information technology PVT- bangalore ,east of Unacademy </h3></th></tr></table></div>

<form onsubmit="shiva() ,shiva1()" action="https://www.gla.ac.in" method="post" >

<div style="background-color:yellow" align="center"><em><h1>Job Appllication form</h1></em></div>

<table width="100%"><tr><th><table style="border : black 0px solid;" align="left">

<tr><th colspan ="2">Enter Detail</th>

<tr><th><labeL for="username">username:</label></th><th><input type="text" name="username" id="username" min="3" max="20" required></th></tr>

<tr><th><labeL for="password">Password:</label></th><th><input type="password" name="password" id="password" min="3" max="10" required></th></tr>

<tr><th><labeL for="confirm password">Confirm Password:</label></th><th><input type="password" name="password" id="confirm password" min="3" max="10" required></th></tr>

<tr><th colspan ="2" align ="center"><input type="button" name="button1" value ="continue"></th></tr></th></table>

<th ><table style="border:0px solid black;" align="right" ><tr><th colspan="2">Enter information</th></tr>

<tr><th><label for="resgistration">Register Email: </label></th> <th> <input type ="email" name="registration" id ="registration" min="10" max "50" required></th></tr>

<tr><th><label for ="alternate email">Alternate Email</label></th><th><input type="email" id ="alternate email" name="alternate email" min="3' max ="10" required></th></tr>

<tr><th><label for ="secondary password">Secondary Password:</label></th><th><input type="password" id ="secondary password" name=" secondary password" min="3" max="10" required></th></tr>

<tr><th colspan ="2"><button onclick="shiva1()">continue</button></th></tr></th></table>

</table><br><br>

<br>

It is important that you read the guidance notes before completing this apllication form. Please complete this form fully using correct order and precision. Application must be submited within the 2 days of registration otherwise application will get canceled automatiaclly.<br>

<div style="background-color:gray;">

<h2><b>THIS INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE.<b></h2></div>

<div style="background-color:yellow;" >

<h2 align="left"><b>Personal details:<b></h2></div>

<table style="border:0px solid black;" width="100%"><tr><th><table align="left"><tr><th><label for="first">First Name:</label></th><th><input type ="text" name ="first" id="first" required></th></tr>

<tr><th><label for ="gender">Gender:</label></th><th><input type= "radio" name ="gender" id ="gender" ><label for ="gender">Male</label><br><input type="radio" name="gender" id ="gender" required><label for ="gender">Female</label> </th></tr>

<tr><th><label for="language">Language known:</label></th>

<th><input list="language" required>

<datalist id="language">

<option value="English">

<option value="Hindi">

<option value="Urdu">

<option value="sankrit">

<option value="french">

</datalist></th>

</table></th>

<th><table align="right" style="border:0px solid black"><tr><th><label for="last">Last Name:</label></th><th><input type="text" name="last" reqired></th></tr>

<tr><th><label for ="religion">Religion:</label></th><th><input type="radio" id="religion" name="religion"><label for ="religion">Hindu</label><br>

<input type="radio" id="gender" name="religion" required> <label for ="religion">Others</label></th></tr>

<tr><th> <label for="preffered">Preferred <abbr title="Programming Language">PL:</abbr></label></th>

<th><input list="preffered" required>

<datalist id="preffered">

<option value="C++">

<option value="Java">

<option value="Python">

<option value="Ruby">

</datalist></th>

</tr>

</table></th></tr></table>

<label for ="qualification">Highest Qualification:</label> <input type="text" name ="highest" id= "highest" required><br><br>

<label for ="mobile">Mobile:</label> <input type="number" placeholder="0123456789" id="mobile" required><br><br>

<label for ="tell about yourself"><textarea name="youself" rows="5" cols="100">Tell about Yourself</textarea><br><br>

<input type="submit" value="Submit" >

<input type="reset" Value="Reset">

</form>

<div style="background-color:yellow;"><blockquote align ="left">www.smdkinfotech.com</blockquote></div>

</body>

</html>

</head>

First 1:





