

## **COLLEGE OF COMPUTER STUDIES & MULTIMEDIA ARTS**

## CCS0027L / IT0043L (Web Design with Client-Side Scripting Lab)

**FORMATIVE** 

3

Third Formative Assessment

Name:	CAMITOC, Isaiah Rain
Section:	AWB21 (3-ALL)
Date:	02/07/2021

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## **OUTPUT:**

REG	STRATION FO	RM
	*First Name:	
	*Last Name:	
	*Birth Date:  MM/DD/YYYY	
	*Sex: O Male O Female  *Home Address:  Home Address	
	*Citizenship: Citizenship	
	*E-mail Address:	
	*Phone Number: Phone no.	
	*Tax Identification Number:	
	*Username: Username	
	*Password: Password *Varify Password	
	*Verify Password:  Verify  *required fields	
	Submit	