Form Design

Registration
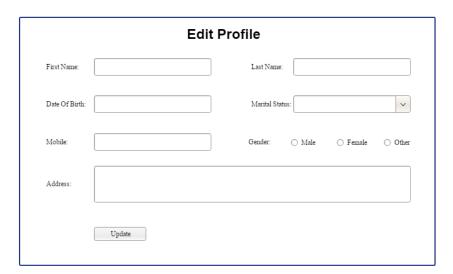
Candidate Registration

First Name: _____   Last Name: _____

Date Of Birth: _____   Marital Status: [_____ ▼]

Mobile: _____   Gender: ○ Male   ○ Female   ○ Other

Address: _____

State: _____   District: _____

E-mail: _____   Password: _____

[Register]

Login

Candidate Login

E-Mail: _____

Password: _____

[LogIn]

Add Qualification

Add Qualification

Education: [   ]

Board/ University: [   ]

Institution: [   ]

Year of Passing [   ]

Percentage of mark: [   ]

[Submit]

Edit Profile

Edit Profile

First Name: [   ]   Last Name: [   ]

Date Of Birth: [   ]   Marital Status: [▾]

Mobile: [   ]   Gender: ○ Male   ○ Female   ○ Other

Address: [   ]

[Update]

Add work Experience

Add Work Experience

Company Name:

Designation:

Job Nature:

Period:

Submit

Search Job

Search Jobs

Search Job:

Description about job1

Apply

Description about job2

Apply

Description about job3

Apply

Tutorials

Tutorial Sections

Online Quiz

Quiz

General aptitude   Time Remaining: 15:23

Q1.Question1 ?
- ○ A. Option 1
- ○ B. Option 2
- ○ C. Option 3
- ○ D. Option 4

Q2.Question2 ?
- ○ A. Option 1
- ○ B. Option 2
- ○ C. Option 3
- ○ D. Option 4

[Finish Quiz]

Company Registration

Company Registration

Name: [   ]

Address: [   ]

Description: [   ]

E-Mail: [   ]

Password: [   ]

[Submit]

Add Job Vacancies

Add Job Vaccancies

Designation:

Job Nature:

Experience:

Salary Package:

Eligibility:

Job Description:

Submit

View applied students/ Jobseeker

View Candidates

No.	Name	Qualifications	Mark Percentage	Action
1	Name1	....	....	Approve
2	Name1	....	....	Reject

Notification to Candidates

Notification To Candidates

Name: [Select ▾]

Description: [   ]

[Send]

View Jobseekers

View JobSeekers

No.	Name	Academic details	Address	proof	Action
1	Name1	....	....	....	[Approve]
2	Name2	....	....	....	[Block]
3	Name3	....	....	....	[Block]
4	Name4	....	....	....	[Block]

View Companies

View Companies

No.	Name	About	Address	proof	Action
1	Name1	....	....	....	Approve
2	Name2	....	....	....	Block
3	Name3	....	....	....	Block
4	Name4	....	....	....	Block

Add Questions

Add Tutorial

Category:

Question:

Option1:

Option2:

Option3:

Option4:

Answer:

Submit

Add Tutorials

Add Tutorial

Category: [   ]

Video: [   ] Browse

Submit