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<!-- apply.html -->
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Apply Now - Your College Name</title>
  <style>
    body {
       font-family: 'Arial', sans-serif;
       margin: 0;
       padding: 0;
       box-sizing: border-box;
       background-color: #f4f4f4;
       color: #333;
    }
    header {
       background-color: #003366;
       color: #fff;
       text-align: center;
       padding: 2em 0;
    }
    section {
       max-width: 800px;
       margin: 20px auto;
       padding: 20px;
       background-color: #fff;
       box-shadow: 0 0 10px rgba(0, 0, 0, 0.1);
    }
    h1, h2 {
       color: #003366;
    }
    p {
       line-height: 1.6;
       color: #333;
    }
    form {
       margin-top: 20px;
    }
    label {
```

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display: block;
       margin-bottom: 5px;
    }
    input, select, textarea {
       width: 100%;
       padding: 10px;
       margin-bottom: 10px;
       border: 1px solid #ccc;
       border-radius: 5px;
    }
    input[type="submit"] {
       background-color: #003366;
       color: #fff;
       cursor: pointer;
    }
    input[type="submit"]:hover {
       background-color: #004080;
    }
    footer {
       background-color: #003366;
       color: #fff;
       text-align: center;
       padding: 1em 0;
    }
  </style>
</head>
<body>
  <header>
    <h1>Your College Name</h1>
    Unlocking Potential, Empowering Futures
  </header>
  <section>
    <h2>Apply Now</h2>
    Thank you for your interest in [Your College Name]. Please fill out the form below to
start your application process.
    <form>
       <label for="name">Name:</label>
       <input type="text" id="name" name="name" required>
       <label for="age">Age:</label>
       <input type="number" id="age" name="age" required>
```