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Name – Samarth chandrabhan pagar
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Div - 2

Roll no - 13224

Assignment no - 1(a)

Problem Statement: Create a responsive web page which shows the ecommerce/college/exam admin dashboard with sidebar and statistics in cards using HTML, CSS and Bootstrap.

Registrationform.html

```
<!DOCTYPE html>
<html>
<head>
<title>Registration Form</title>
<link rel="stylesheet"</pre>
href="https://maxcdn.bootstrapcdn.com/bootstrap/4.5.2/css/bootstrap.min.css">
<script
src="https://maxcdn.bootstrapcdn.com/bootstrap/4.5.2/js/bootstrap.min.js"></sc</pre>
ript>
<style>
.form {
max-width: 500px;
margin: auto;
margin-top: 50px;
border: 1px solid #ccc;
padding: 20px;
border-radius: 10px;
box-shadow: 0px 0px 10px #ccc;
.form h2 {
text-align: center;
margin-bottom: 20px;
</style>
</head>
<body>
<div class="container">
<div class="form">
<br><br><br>></pr>
<h2>Registration Form</h2>
<form>
<div class="form-group">
```

```
<label for="name">Name:</label>
<input type="text" class="form-control" id="name" placeholder="Enter your</pre>
name" required
data-toggle="tooltip" title="enter full name">
</div>
<div class="form-group">
<label for="email">Email address:</label>
<input type="email" class="form-control" id="email" placeholder="Enter email"</pre>
required
data-toggle="tooltip" title="enter valid email address">
</div>
<div class="form-group">
<label for="password">Password:</label>
<input type="password" class="form-control" id="password" placeholder="Enter</pre>
password"
required>
</div>
<div class="form-group">
<label for="confirm password">Confirm Password:</label>
<input type="password" class="form-control" id="confirm_password"</pre>
placeholder="Confirm
password" required>
</div>
<div class="form-group">
<label for="phone">Phone:</label>
<input type="tel" class="form-control" id="phone" placeholder="Enter phone</pre>
number">
</div>
<div class="form-group">
<label for="dob">Date of Birth:</label>
<input type="date" class="form-control" id="dob" placeholder="Enter date of</pre>
birth">
</div>
<div class="form-group form-check">
<label class="form-check-label">
<input class="form-check-input" type="checkbox" required> I agree to the terms
and
conditions.
</label>
</div>
<button type="submit" class="btn btn-primary btn-block" data-toggle="tooltip"</pre>
title="CLick
here to submit">Submit</button>
<button class=" btn btn-primary"> <span class="badge badge-primary badge-</pre>
pill">Back to
   previous</span></button>
```

```
</form>
</div>
</div>
</body>
</html>
```

Output:

