<html>

<head>

</head>

<body>

<form action="#" name="StudenSignupForm" onsubmit="return(validateHTMlform());">

<div cellpadding="2" width="20%" bgcolor="99FFFF" align="center"

cellspacing="2">

<ul>

<li>

<center><font size=4><b>Student Registration Form</b></font></center>

</li>

</ul>

<ul>

<li>First Name</li>

<li><input type=text name=textnames id="textname" size="30"></li>

</ul>

  <ul>

<li>

  Last Name</li>

<li><input type=text name=lastnames id="lastname" size="30"></li>

</ul>

<ul>

<li>Father Name</li>

<li><input type="text" name="full\_father\_name" id="fathername"

size="30"></li>

</ul>

<ul>

<li>Address</li>

<li><input type="text" name="personal\_address"

id="personaladdress" size="30"></li>

</ul>

<ul>

<li>Gender</li>

<li><input type="radio" name="sex" value="male" size="10">Male

<input type="radio" name="sex" value="Female" size="10">Female</li>

</ul>

<ul>

<li>City</li>

<li><select name="City">

<option value="-1" selected>select..</option>

<option value="KOLKATA">KOLKATA</option>

<option value="CHENNAI">CHENNAI</option>

<option value="PUNE">PUNE</option>

<option value="JAIPUR">JAIPUR</option>

</select></li>

</ul>

<ul>

<li>Course</li>

<li><select name="Course">

<option value="-1" selected>select..</option>

<option value="B.Tech">B.TECH</option>

<option value="MCA">MCA</option>

<option value="MBA">MBA</option>

<option value="BCA">BCA</option>

</select></li>

</ul>

<ul>

<li>State</li>

<li><select Name="State">

<option value="-1" selected>select..</option>

<option value="New Delhi">NEW DELHI</option>

<option value="Mumbai">MUMBAI</option>

<option value="Goa">GOA</option>

<option value="Bihar">BIHAR</option>

</select></li>

</ul>

  <ul>

<li>District</li>

<li><select name="Disulict">

<option value="-1" selected>select..</option>

<option value="Nalanda">NALANDA</option>

<option value="UP">UP</option>

<option value="Goa">GOA</option>

<option value="Patna">PATNA</option>

</select></li>

</ul>

<ul>

<li>PinCode</li>

<li><input type="text" name="pin\_code" id="pincode" size="30"></li>

</ul>

<ul>

<li>student email</li>

<li><input type="text" name="email\_id" id="emailid" size="30"></li>

</ul>

<ul>

<li>Date Of Birth</li>

<li><input type="text" name="date\_of\_birth" id="dob" size="30"></li>

</ul>

<ul>

<li>Mobile Number</li>

<li><input type="text" name="mobilenumber" id="mobile\_no" size="30"></li>

</ul>

<ul>

<li><input type="reset"></li>

<li colspan="2"><input type="submit" value="Submit Form" /></li>

</ul>

</div>

</form>

</body>

</html>

Graphical user interface

Description automatically generated