Assignment 2: Create a web page layout and student information form (div tag, form tag, and without CSS).

Program:

```html
<!DOCTYPE html>
<head>
    <meta charset="UTF-8">
    <meta http-equiv="X-UA-Compatible" content="IE=edge">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <title>Web Technology</title>
    <link rel="stylesheet" type="text/css" href="style.css" />
</head>
<header>
    <nav>
        <ul class="text">
         <li>
            <img src="/OIP.jfif" alt="" class="logo">
         </li>
        <li>
        <a href="#"> Home </a>
        </li>
        <li>
        <a href="#"> About </a>
        </li>
        <li>
        <a href="#"> Contact </a>
        </li>
        <li> <a href="#"> Terms of use </a>
        </li>
        <li>
        <a href="#"> Join Us </a>
        </li>
        </ul>
        </nav>
</header>
<body>
```

```html
    <img style="padding-bottom: 10px;" src="/img1.jpg" alt=""  width="100%">
<div class="form">


    <div class="heading"><h1 align = "center">Student Registration
Form</h1></div>
    <center>


    <form class="foemText">
        <label for="NAME">Name:</label>
        <input type="text" name="Name" id="Name">
        <label for="ROLL NO">Reg no:</label>
        <input type="text" name="Reg no" id="Reg no"><br><br>
        <label for="ADDRESS">Address:</label>
        <textarea name="Address" id="Address" cols="25"
rows="3"></textarea><br><br>
        <label for="EMAIL ID">Email id:</label>
        <input type="text" name="Email id" id="Email id"><br><br>
        <label for="PASSWORD">Password:</label>
        <input type="password" name="password" id="password"><br><br>
        <P><label for="GENDER">Gender:</label>
        <label for="male">Male</label>
        <input type="radio" name="Gender" id="male">
        <label for="female">Female</label>
        <input type="radio" name="Gender" id="female"></P>
        <p><label for="BRANCH">Branch:</label>
        <input type="checkbox" name="Branch" id="CT/CSE">
        <label for="CT">CT</label>
        <input type="checkbox" name="Branch" id="IT">
        <label for="IT">IT</label>
        <input type="checkbox" name="Branch" id="ME">
        <label for="ME">ME</label>
        <input type="checkbox" name="Branch" id="CIVIL">
        <label for="CIVIL">CIVIL</label></P>
        <p><label for="INTEREST">Interest Area:</label>
        <select name="Interest" id="Interest">
            <option value="Machine Learning">Machine Learning</option>
            <option value="Data Science">Data Science</option>
            <option value="Web Development">Web Development</option>
        </select></p>
        <p><input type="Submit" value="Submit"></p>
        <input type="Reset" value="Reset">


    </form>
</div>
</center>
</body>
```

```
<hr>
<br><br>
<footer>
<div class="links">
    <ul><h3>Usefil LInks</h1>
        <li>Twitter</li>
        <li>Instagram</li>
        <li>LinkedIn</li>
        <li>GitHub</li>
    </ul>
</div>
</footer>
```

Output Screenshots:

Submitted by:		
Name: Radhika Bhoyar	Roll No.:03	Reg. No.: 21070865