AIM

Design and implement a basic student registration form that collects user information and validates inputs using HTML5 features.

Task Description

Create a student registration form using HTML. The form should include fields for:

- Name
- Email
- Age

Add appropriate HTML5 validation to ensure each field is correctly filled before form submission

```
🥫 index.html > 🔗 html > 🛠 head > 🛠 style > ધ .form-container
      <!DOCTYPE html>
      <html lang="en">
        <meta charset="UTF-8">
        <title>Student Registration Form</title>
        <style>
          body {
            font-family: Arial, sans-serif;
            background-color: ■#f9f9f9;
            height: 100vh;
 11
            display: flex;
            justify-content: center;
            align-items: center;
 13
          .form-container {
 15
            background-color: white;
            padding: 30px 40px;
 17
            border-radius: 10px;
            box-shadow: 0 0 10px □rgba(0,0,0,0.1);
          h1 {
 21
            text-align: left;
            font-size: 26px;
            font-weight: bold;
            margin-bottom: 20px;
```

```
label {
       display: block;
       margin-top: 15px;
       font-weight: bold;
     input[type="text"],
     input[type="email"],
     input[type="number"] {
       width: 100%;
       padding: 6px;
       margin-top: 5px;
       border: 1px solid ■#ccc;
       border-radius: 4px;
       font-size: 14px;
     input[type="submit"] {
       margin-top: 25px;
       padding: 6px 16px;
       border: 1px solid ■#777;
       border-radius: 4px;
       background-color: #eee;
       cursor: pointer;
       font-size: 14px;
     input[type="submit"]:hover {
       background-color: ■#ddd;
<div class="form-container">
 <h1>Student Registration Form</h1>
  <form>
   <label for="name">Name:</label>
   <input type="text" id="name" name="name" placeholder="Enter your full name" required>
   <label for="email">Email:</label>
   <input type="email" id="email" name="email" placeholder="Enter your email" required>
    <label for="age">Age:</label>
    <input type="number" id="age" name="age" placeholder="Enter" required>
   <input type="submit" value="Register">
  </form>
```

Name:	
VIS	HAL
Ema	il:
23B	IS70006@cuchd.in
Age	:
20	