Assignment 1

Name: AV Deekshith Regno:20BCE2223

```
Code:
<!DOCTYPE html>
<html>
<head>
  <title>Styled Form</title>
  <style>
    /* CSS styling for the form */
    body {
      font-family: Arial, sans-serif;
      background-color: #f2f2f2;
    }
    .form-container {
      width: 300px;
      margin: 0 auto;
      padding: 20px;
      background-color: #ffffff;
      border: 1px solid #ccc;
      border-radius: 5px;
    .form-container input[type="text"] {
      width: 100%;
      padding: 10px;
      margin-bottom: 10px;
      border: 1px solid #ccc;
      border-radius: 5px;
    .form-container input[type="submit"] {
      background-color: #4CAF50;
```

```
color: white;
      padding: 10px 15px;
      border: none;
      border-radius: 5px;
      cursor: pointer;
    }
    .form-container input[type="submit"]:hover {
      background-color: #45a049;
    }
  </style>
</head>
<body>
  <div class="form-container">
    <form>
      <input type="text" placeholder="Enter your name" name="name" required>
      <input type="submit" value="Submit">
    </form>
  </div>
</body>
</html>
```

OUTPUT:

