

CLIENT SIDE SCRIPTING (22519)

Practical No. 06: Create web page using [Form](#) Elements

Roll No.: 220447

1) WAP to use all the elements in **HTML** to create a **form**.

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport"
content="width=device-width,
initial-scale=1.0">
  <title>Form</title>
  <link rel="stylesheet"
href="style.css">
</head>
<body>
  <section id="form-section">
    <div class="form-div">
      <form
action="submit.html" name="form1"
id="form1">
        <div
class="inputs">
          <div class="form-
col-1">
            <label
for="fname">Enter First name
</label>
            <input
type="text" name="fname"
id="fname" maxlength="20">
            <label
for="lname">Enter Last name
</label>
            <input
type="text" name="lname"
id="lname" maxlength="15">
            <input
type="text" value="" id="fullname"
placeholder="Full name">
            <input
type="number" id="phno"
placeholder="Phone Number">
            <input
type="email" name="email"
id="email" placeholder="Email id">
            <input
type="password" placeholder="Enter
Password">
            <div
class="checkbox-div">
              <label
for="hindi">Hindi</label> <input
type="checkbox" name=""
id="hindi">
              <label
for="english">English</label> <input
type="checkbox" name="" id="english">
              <label
for="marathi">Marathi</label> <input
type="checkbox" name="" id="marathi">
            </div>
            <div class="radio-
div">
              <label
for="male">Male</label> <input
type="radio" name="gender" id="male">
              <label
for="female">Female</label> <input
type="radio" name="gender" id="female">
            </div>
            </div>
            <div class="form-col-2">
              <label
for="selection">Current
Profession</label>
              <select
name="profession" id="profession">
                <option
value="Engineer/Developer">Engineer/Deve
loper</option>
                <option
value="Student">Student</option>
                <option
value="Teacher">Teacher</option>
                <option
value="Admin Staff">Admin Staff</option>
                <option
value="Principial">Principial</option>
                <option
value="Other">Other</option>
              </select>
              <input type="text"
id="other" placeholder="If other, then
please specify">
              <label
for="dob">Date of Birth</label>
              <input
type="date" name="dob" id="dob">
              <input
type="number" name="age" id="age"
placeholder="Age">
              <label
style="margin-bottom:10px"> Upload
SSC Marksheet </label> <input
```

CLIENT SIDE SCRIPTING (22519)

Practical No. 06: Create web page using [Form](#) Elements

Roll No.: 220447

```
type="file" name="marksheet"
id="marksheet">
<label
style="margin-bottom:10px"> Your
Fav Color </label> <input
type="color">
</div>
</div>
type="reset">
<input
type="submit">
</form>
</div>
</section>
</body>
</html>
```

Enter First Name <input type="text"/>	Current Profession <input type="text" value="Student"/>
Enter Last Name <input type="text"/>	<input type="text" value="If other, then please specify"/>
<input type="text" value="Full Name"/>	Date of Birth <input type="text" value="dd-mm-yyyy"/>
<input type="text" value="Phone Number"/>	<input type="text" value="Age"/>
<input type="text" value="Email ID"/>	Upload SSC Marksheet <input type="button" value="Choose File"/> No file chosen
<input type="text" value="Enter Password"/>	Your Fav Color <input type="text" value=""/>
Hindi <input type="checkbox"/> English <input type="checkbox"/> Marathi <input type="checkbox"/>	
Male <input type="radio"/> Female <input type="radio"/>	
<input type="button" value="Reset"/> <input type="button" value="Submit"/>	

Enter First Name <input type="text" value="Abdul Mannan"/>	Current Profession <input type="text" value="Student"/>
Enter Last Name <input type="text" value="Sayyed"/>	<input type="text" value="If other, then please specify"/>
<input type="text" value="Abdul Mannan Sayyed"/>	Date of Birth <input type="text" value="21-11-2006"/>
<input type="text" value="9172691726"/>	<input type="text" value="17"/>
<input type="text" value="sdabmannan786@gmail.com"/>	Upload SSC Marksheet <input type="button" value="Choose File"/> marksheetabm.jpg
<input type="text" value="....."/>	Your Fav Color <input type="text" value=""/>
Hindi <input checked="" type="checkbox"/> English <input checked="" type="checkbox"/> Marathi <input checked="" type="checkbox"/>	
Male <input checked="" type="radio"/> Female <input type="radio"/>	
<input type="button" value="Reset"/> <input type="button" value="Submit"/>	