

FULL STACK DEVELOPER MEAN COURSE

**PROJECT REPORT
SUBMITTED BY**



NAME : CHINNANNAN GOVINDHARAJAN

PROJECT TITLE SHEET

GOD OF WAR

Project Report Submitted

In partial fulfilment of the requirement for the
proficient certificate course

Done By

CHINNANNAN GOVINDHARAJAN

Under the guidance of

A.MERCY DEEPA

Approved By

BALAMURUGAN T S

Course Objective:

A **full stack web developer** is a person who can develop both client and server software.

Front End:

- HTML
- CSS
- Angular
- Bootstrap
- Java Script
- Pyscript
- Django

Back End:

- Flask

Database:

- SQLite

ABOUT PUMO TECHNOVATION

- ✓ We are the India's Largest Design, Developer and Manufacture of Fracture CON ROD's also Owning Technical Campus Collaborated with world's leading companies like FANUC INDIA, MITSUBISHI CUTTING TOOLS, ACCURATE GAUGES, ADITYA MEASUREMENTS, RENISHAW & MITUTOYA (JAPAN).
- ✓ Our total lab setup is focused for engineer's and industries updating requirements. the tech campus is completely accelerating under the guidance of industrial experts having 27+ years' experience and young aspirants, Pumo Technovation is the first tech campus to have all facilities & labs in India to offer training courses and job assurance all under one roof.
- ✓ Pumo Technovation Training in IT, Electronics & Electricals creating experts for emerging technology industries and specialist technology jobs.
- ✓ A part of CADD Centre, which is Asia's largest CAD/CAM/CAE training institute.

PROJECT OBJECT

- ✓ Design Student Registration Form in HTML with CSS using Table in HTML. A simple HTML Code for Student Registration Form that contains all necessary fields in the student registration form. Take an example, First-Name, Last-Name, Email-id, Mobile Number, Address, Hobbies, Course, Gender, Date-of-Birth, etc.
- ✓ Create a beautiful Student Registration Form in HTML with CSS, also validate student registration form in HTML(Hypertext markup language) and CSS(Cascading style sheets). The student registration form also contains the SUBMIT and RESET buttons if any student enters the wrong data while filling the registration form so he/she can reset the form in HTML.

HARDWARE AND SOFTWARE REQUIREMENTS:

HARDWARE :

- ✓ Device name : Chinnannan
Govindarajan
- ✓ Processor : 11th Gen Intel(R)
Core(TM) i5-1155G7 @
2.50GHz 2.50 GHz
- ✓ Installed RAM : 8.00 GB (7.65 GB usable)
- ✓ Device ID : 510B6CCD-229D-45E3-
B733-91DC80B234D8
- ✓ Product ID : 00356-24559-35268-
AAOEM
- ✓ System type : 64-bit operating system,
x64-based processor
- ✓ Pen and touch : No pen or touch input is
available for this display

SOFTWARE:

- ✓ BOOTSTRAP 5.1.2V CDN
- ✓ VISUAL STUDIO CODE
- ✓ CHROME WEB PAGE

SOURCE CODE:

```
<html>
<head>
  <title>STUDENT REGISTRATION FORM</title>
  <link
href="https://cdn.jsdelivr.net/npm/bootstrap@5.2.3/dist/css/boot
strap.min.css" rel="stylesheet" integrity="sha384-
rbsA2VBKQhggwzxH7pPCaAqO46MgnOM80zW1RWuH61DGLwZJEdK2Kadq2F9CUG65
" crossorigin="anonymous">
  <script
src="https://cdn.jsdelivr.net/npm/bootstrap@5.2.3/dist/js/bootst
rap.bundle.min.js" integrity="sha384-
kenU1KFdBIe4zVF0s0G1M5b4hcxpyD9F7jL+jjXkk+Q2h455rYXK/7HAuoJl+0I4
" crossorigin="anonymous"></script>
  <script
src="https://cdn.jsdelivr.net/npm/@popperjs/core@2.11.6/dist/umd
/popper.min.js" integrity="sha384-
oBqDVmMz9ATKxIep9tiCxS/Z9fNfEXiDAYTujMAeBAsjFuCZSmKbSSUnQlhmh/jp3
" crossorigin="anonymous"></script>
  <script
src="https://cdn.jsdelivr.net/npm/bootstrap@5.2.3/dist/js/bootst
rap.min.js" integrity="sha384-
cuYeSxntonz0PPNlHhBs68uyIAVpII0ZZ5JqeqvYYIcEL727kskC66kF92t6X12V
" crossorigin="anonymous"></script>
  <link rel="stylesheet" href="SRFV.css">
</head>
<body>
  <center><h1><u>STUDENT REGISTRATION FORM</u></h1></center>
  <marquee id="marq">Note :- Please enter your all
details</marquee>
  <form action="SRFV SUBMIT.html" name="myfrom"
method="post" onsubmit="return check()">
    <table align="center" cellpadding="10">
      <tr>
        <td>FIRST NAME</td>
        <td><input type="text" name="First Name"
id="firstname" maxlength="10"/>(max 10 characters a-z and A-
Z)</td>
      </tr>
```

SOURCE CODE:

```
<tr>
    <td>LAST NAME</td>
    <td><input type="text" name="Last Name"
id="lastname" maxlength="10"/>(max 10 characters a-z and A-
Z)</td>
</tr>
<tr>
    <td>FATHER NAME</td>
    <td><input type="text" name="Father Name"
id="fathername" maxlength="15"/>(max 10 characters a-z and A-
Z)</td>
</tr>
<tr>
    <td>MOTHER NAME</td>
    <td><input type="text" name="Mother Name"
id="mothername" maxlength="15"/>(max 10 characters a-z and A-
Z)</td>
</tr>
<tr>
    <td>DATE OF BIRTH</td>
    <td><input type="date" name="date" id="date"
min="1981-01-01"/></td>
</tr>
<tr>
    <td>EMAIL - ID</td>
    <td><input type="text" name="email"
maxlength="100"/></td>
</tr>
<tr>
    <td>MOBILE NUMBER</td>
    <td><input type="text" name="Mobilenumber"
maxlength="10"/></td>
</tr>
<tr>
    <td>GENDER</td>
    <td>Male <input type="radio" name="gender"
value="male"/>
Female <input type="radio" name="gender"
value="female"/>
```


SOURCE CODE:

```
</td>
    </tr>
    <tr>
        <td>ADDRESS</td>
        <td><textarea name="address"
cols="30"></textarea></td>
    </tr>
    <tr>
        <td>STATE</td>
        <td><select id="state" name="state">
            <option value="Select a state">Select a
state</option>
            <option
value="Tamilnadu">Tamilnadu</option>
            <option value="Assam">Assam</option>
            <option value="New Delhi">New
Delhi</option>
            <option
value="Karnataka">Karnataka</option>
            <option value="Pune">Pune</option>
        </select>
    </td>
    </tr>
    <tr>
        <td>COUNTRY</td>
        <td><input type="text" value="India"
name="country" readonly="readonly"/></td>
    </tr>
    <tr>
        <td>QUALIFICATION</td>
        <td>
            <table border="2"
class="qualification">
                <tr align="center">
                    <td><b>SL.NO</b></td>
                    <td><b>Examination</b></td>
```

SOURCE CODE:

```
<td><b>Board</b></td>
                                <td><b>Year Of Passing</b></td>
                                <td><b>Percentage</b></td>
                                </tr>
                                <tr align="center">
                                <td>1</td>
                                <td>Class-X</td>
                                <td><input type="text"
name="Board" id="qualification" maxlength="10" placeholder="Enter
your Board"></td>
                                <td><input type="text" name="Year
of Passing" id="qualification" maxlength="10" placeholder="Enter
your Year"></td>
                                <td><input type="text"
name="Percentage" id="qualification" maxlength="10"
placeholder="Enter your Percentage"></td>
                                </tr>
                                <tr align="center">
                                <td>2</td>
                                <td>Class-XII</td>
                                <td><input type="text"
name="Board" maxlength="10" placeholder="Enter your Board"></td>
                                <td><input type="text" name="Year
of Passing" maxlength="10" placeholder="Enter your Year"></td>
                                <td><input type="text"
name="Percentage" maxlength="10" placeholder="Enter your
Percentage"></td>
                                </tr>
                                <tr align="center">
                                <td>3</td>
                                <td>Graduation</td>
                                <td><input type="text"
name="Board" id="qualification" maxlength="10" placeholder="Enter
your Board"></td>
                                <td><input type="text" name="Year
of Passing" id="qualification" maxlength="10" placeholder="Enter
your Year"></td>
```

SOURCE CODE:

```
<td><input type="text" name="Percentage" id="qualification"
maxlength="10" placeholder="Enter your Percentage"></td>
</tr>
<tr align="center">
<td>4</td>
<td>Masters</td>
<td><input type="text"
name="Board" maxlength="10" placeholder="Enter your Board"></td>
<td><input type="text" name="Year
of Passing" maxlength="10" placeholder="Enter your Year"></td>
<td><input type="text"
name="Percentage" maxlength="10" placeholder="Enter your
Percentage"></td>
</tr>
</table>
</td>
</tr>
<tr>
<td>COURSE APPLIED FOR</td>
<td><select name="course" id="course">
<option value="empty">Select your
course</option>
<option value="BA">B.A</option>
<option value="BSC">B.S.C</option>
<option value="MBA">M.B.A</option>
<option value="BCom">B.Com</option>
<option value="Diploma">Diploma</option>
</select></td>
</tr>
<tr>
<td>HOBBIES</td>
<td>Drawing : <input type="checkbox"
name="hobby" value="draw"/>
cricket : <input type="checkbox"
name="hobby" value="cri"/>
swimming : <input type="checkbox"
name="hobby" value="swim"/>
travelling : <input type="checkbox"
name="hobby" value="travel"/>
```

SOURCE CODE:

```
</td>
</tr>
<tr>
    <td colspan="2" align="center">
        <input type="submit" name="submit"
value="Submit"/> <input type="reset" name="reset" value="Reset">
    </td>
</tr>
</table>
</form>
<script type="text/javascript">
    function check(){
        var
firstname=document.forms["myfrom"]['firstname'].value;
        var
lastname=document.forms["myfrom"]['lastname'].value;
        var
fathername=document.forms["myfrom"]['fathername'].value;
        var
mothername=document.forms["myfrom"]['mothername'].value;
        var date=document.forms["myfrom"]['date'].value;
        var email=document.forms["myfrom"]['email'].value;
        var
Mobilenumber=document.forms["myfrom"]['Mobilenumber'].value;
        var
gender=document.forms["myfrom"]['gender'].value;
        var
address=document.forms["myfrom"]['address'].value;
        var state=document.forms["myfrom"]['state'].value;
        var
qualification=document.getElementById('qualification').value;
        var
course=document.forms["myfrom"]['course'].value;
        if(firstname==""){
            alert("please enter the Firstname");
            return false;
        }
        if(firstname.length<3){
            alert("first name lenght should be gerater
than 3 char");
```

SOURCE CODE:

```
return false;
    }
    if(!isNaN(firstname)){
        alert("only characters are allowed for first
name");
        return false;
    }
    if(lastname==""){
        alert("please enter the Lastname");
        return false;
    }
    if(lastname.length<3){
        alert("last name length should be gerater than
3 char");
        return false;
    }
    if(!isNaN(lastname)){
        alert("only characters are allowed for last
name");
        return false;
    }
    if(fathername==""){
        alert("please enter the Fathername");
        return false;
    }
    if(fathername.length<5){
        alert("father name length should be gerater
than 5 char");
        return false;
    }
    if(!isNaN(fathername)){
        alert("only characters are allowed for father
name");
        return false;
    }
    if(mothername==""){
        alert("please enter the Mothername");
        return false;
    }
}
```

SOURCE CODE:

```
if(mothername.length<5){
    alert("mother name length should be gerater
than 5 char");
    return false;
}
if(!isNaN(mothername)){
    alert("only characters are allowed for mother
name");
    return false;
}
if(date==""){
    alert("Please enter date");
    return false;
}
var at = email.indexOf("@");
var dot = email.lastIndexOf(".");

if(at<1||dot<at+2||dot+2 >= email.length)
{
    alert("Not a vaild email");
    return false;
}
if(Mobilenumber==""){
    alert("Please enter Mobile number");
    return false;
}
if(isNaN(Mobilenumber)){
    alert("Mobile number. should be in digit.");
    return false;
}
if(Mobilenumber.length!=10){
    alert("Must be 10 digit no.");
    return false;
}
if(gender==""){
    alert("Please Select a gender");
    return false;
}
```

SOURCE CODE:

```
if(address==""){
    alert("Please Enter an address");
    return false;
}
if(state=="Select a State"){
    alert("Select a State");
    return false;
}
if(qualification==""){
    alert("Please enter your qualification");
    return false;
}
if(course==""){
    alert("Please select your course");
    return false;
}
}
</script>
</body>
</html>
```

=====

COMPLETE THE PROGRAM

=====

SOURCE CODE:

```
<!DOCTYPE html>
<html lang="en">
<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>Student Registration Form</title>
  <link rel="stylesheet" href="SRFV.css">
</head>
<body align="center">
  <h1><br><br><br><br><br><br><br>Thank you for your
Registration</h1>
</body>
</html>
```

=====

COMPLETE THE PROGRAM

=====

CSS SOURCE CODE:

```
body{
    background-color: yellow;
    font-family:'Times New Roman', Times, serif ;
}
h1{
    color: black;
}
#marq{
    font-size: large;
    font-family: 'Gill Sans', 'Gill Sans MT', Calibri,
'Trebuchet MS', sans-serif;
    color: red;
}
form{
    width: 100%;
    height: 60%;
    border-radius: 100px;
    border-top: 100px;
    font-size: 20px;
    padding: 10px;
    background-repeat: repeat;
    background-size: 100%;
}
input[type="submit"]{
    width: 20%;
    font-size: large;
}
input[type="reset"]{
    width: 20%;
    font-size: large;
}
```

COMPLETE THE PROGRAM

SCREENSHORTS:

STUDENT REGISTRATION FORM

File | D:/project/SRF/SRFV.html

STUI This page says please enter the Firstname OK

FIRST NAME

LAST NAME (max 10 characters a-z and A-Z)

FATHER NAME (max 10 characters a-z and A-Z)

MOTHER NAME (max 10 characters a-z and A-Z)

DATE OF BIRTH dd-mm-yyyy

EMAIL - ID

MOBILE NUMBER

GENDER Male ☐ Female ☐

ADDRESS

STATE Select a state

COUNTRY India

QUALIFICATION

SL.NO	Examination	Board	Year Of Passing	Percentage
1	Class-X	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
2	Class-XII	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
3	Graduation	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
4	Masters	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage

Virtual touchpad

52°F Mostly cloudy 15:47 18-04-2023

STUDENT REGISTRATION FORM

File | D:/project/SRF/SRFV.html

Note :- Please enter your all details

FIRST NAME ani (max 10 characters a-z and A-Z)

LAST NAME chinna (max 10 characters a-z and A-Z)

FATHER NAME Govindarajan (max 10 characters a-z and A-Z)

MOTHER NAME Sundarambal (max 10 characters a-z and A-Z)

DATE OF BIRTH dd-mm-yyyy

EMAIL - ID

MOBILE NUMBER

GENDER

ADDRESS

STATE

COUNTRY

QUALIFICATION

SL.NO	Examination	Board	Year Of Passing	Percentage
1	Class-X	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
2	Class-XII	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
3	Graduation	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage
4	Masters	<input type="text"/> Enter your Board	<input type="text"/> Enter your Year	<input type="text"/> Enter your Percentage

52°F Mostly cloudy 15:47 18-04-2023

SCREENSHORTS:

STUDENT REGISTRATION FORM

or all details

FIRST NAME

ani

(max 10 characters a-z and A-Z)

LAST NAME

chinna

(max 10 characters a-z and A-Z)

FATHER NAME

Govindarajan

(max 10 characters a-z and A-Z)

MOTHER NAME

Sundarambal

(max 10 characters a-z and A-Z)

DATE OF BIRTH

01-07-1998

EMAIL - ID

MOBILE NUMBER

GENDER

ADDRESS

STATE

COUNTRY

QUALIFICATION

SL.NO	Examination	Board	Year Of Passing	Percentage
1	Class -X	Enter your Board	Enter your Year	Enter your Percentage
2	Class -XII	Enter your Board	Enter your Year	Enter your Percentage
3	Graduation	Enter your Board	Enter your Year	Enter your Percentage
4	Masters	Enter your Board	Enter your Year	Enter your Percentage

STUDENT REGISTRATION FORM

Note :- Please enter your all details

FIRST NAME

ani

(max 10 characters a-z and A-Z)

LAST NAME

chinna

(max 10 characters a-z and A-Z)

FATHER NAME

Govindarajan

(max 10 characters a-z and A-Z)

MOTHER NAME

Sundarambal

(max 10 characters a-z and A-Z)

DATE OF BIRTH

01-07-1998

EMAIL - ID

MOBILE NUMBER

GENDER

Male ☐ Female ☐

ADDRESS

STATE

Select a state

COUNTRY

India

QUALIFICATION

SL.NO	Examination	Board	Year Of Passing	Percentage
1	Class -X	Enter your Board	Enter your Year	Enter your Percentage
2	Class -XII	Enter your Board	Enter your Year	Enter your Percentage
3	Graduation	Enter your Board	Enter your Year	Enter your Percentage
4	Masters	Enter your Board	Enter your Year	Enter your Percentage

SCREENSHORTS:

STUDENT REGISTRATION FORM

Note - Please enter your all details

FIRST NAME (max 10 characters a-z and A-Z)

LAST NAME (max 10 characters a-z and A-Z)

FATHER NAME (max 10 characters a-z and A-Z)

MOTHER NAME (max 10 characters a-z and A-Z)

DATE OF BIRTH

EMAIL - ID

MOBILE NUMBER

GENDER ☒ Male ☐ Female

ADDRESS

STATE

COUNTRY

SL_NO	Examination	Board	Year Of Passing	Percentage
1	Class -X	Sate Board	2013	72
2	Class-XII	null	null	null
3	Graduation	Diploma	2016	78
4	Masters	null	null	null

QUALIFICATION

COURSE APPLIED FOR

HOBBIES ☒ Drawing ☒ cricket ☒ swimming ☒ travelling

Student Registration Form

File | D:/project/SRF/submit.html

Thank you for your Registration

THANK YOU

