

LAB REPORT

Submitted By-

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Section: B

Course Code: CSE 418

Submitted to-

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Show and Hide Text by Clicking Button Code:

```
<!DOCTYPE html>
<html lang="en">
<head>
    <meta charset="UTF-8">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <meta http-equiv="X-UA-Compatible" content="ie=edge">
    <title>Document</title>
</head>
<body>
    This is a text
    <button type="button" onclick='document.getElementById("demo").style.display</pre>
= "block"'>Show Text</button>
    <button type="button" onclick='document.getElementById("demo").style.display</pre>
= "none"'>Hide Text</button>
</body>
</html>
Screenshot: (before click the button):
                        This is a text
                         Show Text
                                   Hide Text
Screenshot: (after click the button):
                                                 This is a text
                 Show Text
                            Hide Text
                                                  Show Text
                                                             Hide Text
```

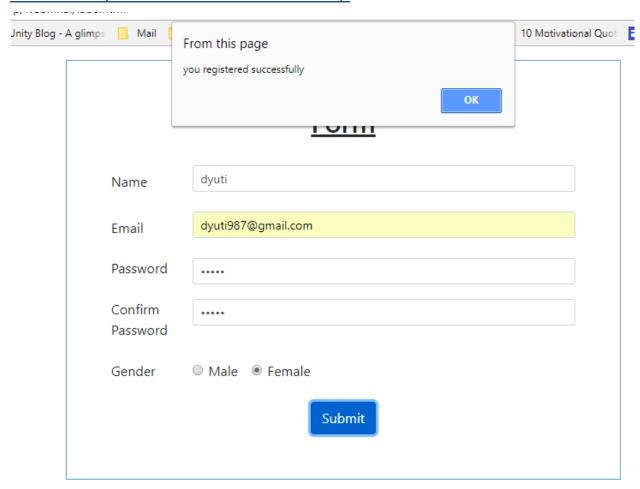
Form Validation Code:

```
<link rel="stylesheet"</pre>
href="https://maxcdn.bootstrapcdn.com/bootstrap/4.0.0/css/bootstrap.min.css"
integrity="sha384-
Gn5384xqQ1aoWXA+058RXPxPg6fy4IWvTNh0E263XmFcJ1SAwiGgFAW/dAiS6JXm"
crossorigin="anonymous">
    <style>
                    .b {
border:thin #4F9FD6 solid;
padding: 8%;
        }
    </style>
                <script> function validateForm()
{
                  var x =
document.forms["form"]["pass1"].value;
                                                        var y =
document.forms["form"]["pass2"].value;
                                                        if (x
                            alert("you registered
== y) {
successfully");
                                     return false;
                                  else{
alert("Password do not match");
return false;
            }
            </script>
    <title>Form</title>
</head>
<body>
    <div class="container w-50 p-3">
        <form class="b" action="#" onsubmit="return validateForm()" method="post"</pre>
name="form">
            <div class="text-center">
                <h2> <u>Form</u> </h2>
            </div>
            <br>
            <div class="form-group row">
                <label for="name" class="col-sm-2 col-form-label">Name</label>
                <div class="col-sm-10">
                    <input type="text" class="form-control form-control-sm"</pre>
id="name" placeholder="Your Name" name="name">
                </div>
            </div>
            <div class="form-group row">
                <label for="email" class="col-sm-2 col-form-label">Email</label>
                <div class="col-sm-10">
                <input type="email" class="form-control form-control-sm"</pre>
id="email" placeholder="email@example.com" name="email">
                </div>
```

```
</div>
            <div class="form-group row">
                <label for="inputPassword" class="col-sm-2 col-</pre>
formlabel">Password</label>
                <div class="col-sm-10">
                <input type="password" class="form-control form-control-sm"</pre>
id="inputPassword" placeholder="Password" name ="pass1" >
                </div>
            </div>
            <div class="form-group row">
                <label for="confirmPassword" class="col-sm-2 col-</pre>
formlabel">Confirm Password</label>
                <div class="col-sm-10">
                <input type="password" class="form-control form-control-sm"</pre>
id="confirmPassword" placeholder="Confirm Password" name="pass2" >
</div>
            </div>
            <div class="form-group row">
                <label for="gender" class="col-sm-2 col-formlabel">Gender</label>
                <div class="col-sm-10">
                     <div class="form-check form-check-inline">
                         <input class="form-check-input" type="radio" name="male"</pre>
id="male" value="Male">
                         <label class="form-check-label" for="male">Male</label>
                    <div class="form-check form-check-inline">
<input class="form-check-input" type="radio" name="female"</pre>
id="female" value="Female">
                         <label class="form-check-label"</pre>
for="female">Female</label>
                                                  </div>
                </div>
            </div>
            <div class="text-center">
                <button type="submit" class="btn btn-primary">Submit</button>
            </div>
        </form>
    </div>
```

```
</body>
```

Screenshot: (before click the submit button):



Screenshot: (after click the submit button):

blfinal/lab8.html

