

Module08-Activity01

React App

localhost:3000/mymainforms/tabbed-form

Basic Form

Controlled Input

Uncontrolled Input

Tabbed Form

Registration Form with Tabs

Personal Information

Contact Information

Academic Information

Additional Details

Personal Information

First Name:

Marcus

Last Name:

Cariño

Date of Birth:

21/01/2004

Gender:

Male

Submit

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Personal Information

Contact Information

Academic Information

Additional Details

Contact Information

Email:

marcus@gmail.com

Phone:

09789564321

Address:

E.Mallari st

City:

Angeles

Submit

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Personal Information

Contact Information

Academic Information

Additional Details

Academic Information

Student ID:

22-1203

Program:

BSIT

Year Level:

2

GPA:

1

Submit

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Personal Information

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Additional Details

Additional Details

Hobbies:

Secret

Skills:

Secret

Other Notes:

None

Submit

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localhost:3000/mymainforms/tabbed-form

localhost:3000 says

Submitted Data: {
"firstName": "Marcus ",
"lastName": "Cariño",
"dob": "2004-01-21",
"gender": "Male",
"email": "marcus@gmail.com",
"phone": "09789564321",
"address": "E.Mallari st",
"city": "Angeles",
"studentId": "22-1202"

OK

Secret

Skills:

Secret

Other Notes:

None

Submit

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Additional Details

Personal Information

First Name:

First Name is required.

Last Name:

Date of Birth:

dd/mm/yyyy

Gender:

Submit

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Email is required.

Phone:

Address:

City:

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Student ID is required.

Program:

Year Level:

GPA:

Submit