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<!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>survey form</title>


<link rel="stylesheet" type="text/css" href="project.css">

</head>

<body><header>

<main>

<h1>Customer satisfaction survey</h1>

</header>

<form action="/action.php">

  <ul>

<b><li> <label for="991"> Name:</label> </b>

<input id="991" type="text" placeholder="First name" required>

<label for="991"></label>

<input id="991" type="text" placeholder="Last name" required> </li>

<br>

<br>

<b> <li><label for="199">Date of birth :</label> </b>

<input type="date" id="199" required>

</label> </li>

<br>

<br>

<b><li><label for="992">Mobile number :</label></b>

<input id="992" type="number" placeholder=" Mob. number" required> </li>

<br>

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<b> <li><label for="993">Email id :</label></b>
<input id="993" type="text" placeholder=" Email " required></li>
<br>
<br>
<b> <li><label for="101"> Gender : </label></b>
<input type="radio" value="male" name="gender" id="101" required> MALE
</label>
<label for="102">
<input type="radio" value="female" name="gender" id="102" required> FEMALE
</label>
<label for="103">
<input type="radio" value="others" name="gender" id="103" required> OTHERS
</label></li>
<br>
<br>
<b><li><section> Address (Optional) :</section></b><pre>
  <textarea rows="5" cols="40" name="address" id="100" placeholder="address">Write address
here...</textarea> </pre> </li>
<br><br>
<b> <li>Choose your product type :</b>
<br><br>
<label for="111">
<input type="checkbox" value="fashion" name="product type" id="111" > FASHION
</label>
<label for="112">
<input type="checkbox" value="beauty" name="product type" id="112" > BEAUTY
</label>
<label for="113">
<input type="checkbox" value="grocery" name="product type" id="113" > GROCERY
</label>
<label for="114">
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<input type="checkbox" value="mobile&tablets" name="product type" id="114" >

MOBILE & TABLETS

</label>

<label for="115">

<input type="checkbox" value="electronics" name="product type" id="115" >

ELECTRONICS

</label> </li>

<br><br>

<b> <li> What impressed you most about the product : </b>

<br><br>

<label for="121">

<input type="checkbox" value="quality" name="product" id="121"> QUALITY

</label>

<label for="122">

<input type="checkbox" value="price" name="product" id="122"> PRICE

</label>

<label for="123">

<input type="checkbox" value="design" name="product" id="123"> DESIGN

</label>

<label for="124">

<input type="checkbox" value="usability" name="product" id="124"> USABILITY

</label> </li><br><br>

<b><li> Thinking of similar product offered by other companies.

How would you compare the product offered by our company.</b>

<br><br>

<!--<b><p> choose one of them</p> </b>-->

<select name="choice">

<option value="excellence">EXCELLENCE </option>

<option value="good">GOOD </option>

<option value="same">SAME </option>

<option value="worse">WORSE </option>

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<option value="much worse">MUCH WORSE </option>
</select></li> <br><br>
<b><li> Would you purchase from this company again </b>
<br><br>
<select name="choose">
<option value="yes"> YES</option>
<option value="no"> NO </option>
</select></li> <br><br>
<b><li> How satisfy were you with the product </b>
<br><br>
<label for="131">
<input type="radio" value="excellent" name="product satisfaction" id="131"
required> EXCELLENT
</label>
<label for="132">
<input type="radio" value="satisfied" name="product satisfaction" id="132"
required> SATISFIED
</label>
<label for="133">
<input type="radio" value="unsatisfied" name="product satisfaction" id="133"
required> UNSATISFIED
</label>
<label for="134">
<input type="radio" value="neutral" name="product satisfaction" id="134" required>
NEUTRAL
</label></li>
<br><br>
<b><li> Would you use our product in the future ? </b>
<br><br>
<select name="choice">
<option value="definetly">DEFINETLY</option>
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<option value="probably">PROBABLY</option>
<option value="not sure">NOT SURE</option>
<option value="probably not">PROBABLY NOT</option>
<option value="definitely">DEFINITLY </option>
</select> </li><br><br>
<b> <li> ANY COMMENT OR SUGGESTION . </b> <br>
<label for="100"></label>
<textarea id="100" rows="8" cols="50" name="feedback" id="100"
placeholder="feedback" required>Write comments here ...</textarea>
<lebel for="109"> </li> <br> <br>
<input type="checkbox" value="agree" name="satisfaction" id="109" required> <b>I
ACCEPT THE TERM AND CONDITION </b>
</lebel>
<pre> <br>
    <input class="demo1" type="reset" value="RESET"> <input class="demo2" type="submit"
value="SEND FEEDBACK">
</pre>
</form>
</main>
<footer>
<h3> Thank you for taking the time to help me improve my Web design skill !! </h3> </ul>
</body>
</html>
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