ASSIGNMENT 1

HTML

Assignment Date	21 October 2022
Student Name	Amirtha Varshini A
Student Roll Number	812419104004
Maximum Marks	2 Marks

Question 1:

Create HTML file

1) 4 input boxes

    -name

    -qualification

    -age

    -email

    -submit button

Solution:

```html
<!DOCTYPE html>
<html>
 <head>
 <meta charset="UTF-8">
 <title>fill details</title>
</head>
<body>
```

```
<form action="thankyou.html"method="post">
<label
for="name">Name*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nb
sp&nbsp&nbsp&nbsp&nbsp

<input id="name" type="text" name="name" placeholder="Enter name"

required><br>

<label for="qualification">Qualification*</label>

<input id="Qualification" type="text" name="Qualification" placeholder="Enter

Qualification"required><br>

<label
for="age">Age*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&
nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp

<input id="Age" type="number "name="Age" placeholder="Enter Age

"required><br>

<label
for="mail">Email*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbs
p&nbsp&nbsp&nbsp&nbsp

<input id="Mail" type="email "name="mail" placeholder="Enter mail

"required><br>

<label
for="number">Number*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
&nbsp

<input id="number" type="number "name="number" placeholder="Enter

number "required<br>

<br>

<br>

&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp

&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
```


`<input type="submit" name="call back"><br>`

`</form>`

`</body>`

`</html>`

```
<!DOCTYPE html>
<html>
 <head>
  <meta charset="UTF-8">
  <title>fill details</title>
 </head>
 <body>
 <form action="thankyou.html"method="post">
 <label for="name">Name*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 <input id="name" type="text" name="name" placeholder="Enter name"
 required><br>
 <label for="qualification">Qualification*</label>
 <input id="Qualification" type="text" name="Qualification"
 placeholder="Enter Qualification"required><br>
 <label for="Age">Age*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 <input id="Age" type="number" name="Age" placeholder="Enter Age
 "required><br>
 <label for="mail">Email*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 <input id="Mail" type="email" name="mail" placeholder="Enter mail
 "required><br>
 <label for="number">Number*</label>&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 <input id="number" type="number" name="number" placeholder="Enter
 number "required<br>
 <br>
 <br>
 &nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 &nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 &nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp&nbsp
 <input type="submit" name="call back"><br>
 </form>
 </body>
 </html>
```

Name* Enter name
Qualification* Enter Qualification
Age* Enter Age
Email* Enter mail
Number* Enter number

Submit