

Assignment -2

Assignment Date	14 October 2022
Student Name	Anne Merin Mathew
Student Roll Number	961819104015
Maximum Marks	2 Marks

Question-1:

Create form of type input text, email, password, radio button text Area, drop down and navigate to success page and display files of form in table (CSS, HTML) html file.

```
<html>
<head>
<title>
Assignment 2
</title>
<div class="banner">
<div>
<center><h1 style="color:white;"><strong> Welcome
All!!</strong></h1></center>
</div>
</div>
</head>
<body>
<center>
<h1><b>Registration Form<b></h1><br>
<form action="tth.html" method="post">
<table>
<tr>
<td><b>Name</b></td>
<td><b>:</b></td>
<td>
<input type="text" name="n1"required>
</td>
</tr>
<tr>
<td><b>Password</b></td>
<td><b>:</b></td>
<td><input type="password" name="pwd" required></td>
</tr>
<tr>
<td><b>Email</b></td>
<td><b>:</b></td>
<td><input type="email" id="email" required></td>
</tr>
<tr>
<td><b>Gender</b></td>
<td><b>:</b></td>
```

```

<td><input type="radio" name="1" value="male">Male</td>
<td><input type="radio" name="1" value="female">Female</td>
</tr>
<tr>
<td><b>Date Of Birth</b></td>
<td><b>:</b></td>
<td><input type="date" name="t1"></td>
</tr>
<tr><td><b>Residential Address</b></td>
<td><b>:</b></td>
<td><textarea id="h1" name="r1" rows="5" cols="50" required>
</textarea></td></tr>
<tr>
<td><b>Permanent Address</b></td>
<td><b>:</b></td>
<td><textarea id="h2" name="r2" rows="5" cols="50" required>
</textarea></td>
</tr>
<tr>
<td><b>State</b></td>
<td><b>:</b></td>
<td><input type="text" name="e1" required></td>
</tr>
<tr>
<td><b>Country</b></td>
<td><b>:</b></td>
<td><input type="text" name="e2" required></td>
</tr>
<tr>
<td><b>College Name</b></td>
<td><b>:</b></td>
<td><textarea id="h1" name="r1" rows="2" cols="50" required>
</textarea></td></tr>
<tr><td><b>Field Of Study</b></td>
<td><b>:</b></td>
<td><select name="Field of Study">
<option value="Arts and Science">Arts and Science</option>
<option value="Medicine">Medicine</option>
<option value="Engineering">Engineering</option>
<option value="Other">Other</option>
</select></td>
</tr>
<tr>
<td><b>Year Of Studying</b></td>
<td><b>:</b></td>
<td><select name="Year of Studying">
<option value="I YEAR">I YEAR</option>
<option value="II YEAR">II YEAR</option>
<option value="III YEAR">III YEAR</option>
<option value="IV YEAR">IV YEAR</option>
<option value="Other">Other</option>
</select>

```

```

</td>
</tr>
<tr><td><b>Percentage of Pervious Year</b></td>
<td><b>:</b></td>
<td><input type="number" name="n1">
</tr>
<tr><td><b>Ambition</b></td>
<td><b>:</b></td>
<td><textarea id="a1" row="2" cols="20" required>
</textarea></td>
</tr>
<tr><td><b>Field Of Interest</b></td>
<td><b>:</b></td>
<td><textarea id="a1" row="2" cols="20" required>
</textarea></td>
</tr>
<tr>
<td><b>Declaration</b></td>
<td><b>:</b></td>
<td><input type="radio" name="r1" value="m1">"Hereby I declare that the
information given above are true to my knowledge"</td>
</tr><br><br>
<tr>
<td align=center><input type="Submit" value="Submit"></td>
<td>

<input type="Reset" value="Clear"></td></tr>
</table></form></center>
</body>
</html>

```

Navigated page code:

tth.html

```

<html>
<head>
<title>Navigated Page</title>
</head>
<body>
<center><h1><b>"Thank You For Entering the Details"</b></h1>
<h2><b>Your Registration is successful and details were recorded</b><h2>
</center>
</body>
</html>

```

Question-2:

Create form of type input text, email, password, radio button text Area, drop down and navigate to success page and display files of form in table (CSS, HTML) html file

For CSS create external style sheet for above task (separate CSS file and link that in html)

Solution:

```
<html>
<head>
<title>
Assignment 2
</title>
<div class="banner">
<div>
<center><h1 style="color:white;"><strong>
Welcome All!!</strong></h1></center>
</div>
</div>
<link rel="stylesheet" type="text/css"
href="externalcss.css">
</head>
<body>

<center>
<h1><b>Registration Form<b></h1><br>
<form action="tth.html" method="post">
<table>
<tr>
<td><b>Name</b></td>
<td><b>:</b></td>
<td>
<input type="text" name="n1"required>
</td>
</tr>
<tr>
<td><b>Password</b></td>
<td><b>:</b></td>
<td><input type="password" name="pwd"
required></td>
</tr>
<tr>
<td><b>Email</b></td>
<td><b>:</b></td>
<td><input type="email" id="email"
required></td>
</tr>
<tr><td><b>Gender</b></td>
<td><b>:</b></td>
```

```

<td><input type="radio" name="1"
value="male">Male</td>
<td><input type="radio" name="1"
value="female">Female</td>
</tr>
<tr>
<td><b>Date Of Birth</b></td>
<td><b>:</b></td>
<td><input type="date" name="t1"></td>
</tr>
<tr><td><b>Residential Address</b></td>
<td><b>:</b></td>
<td><textarea id="h1" name="r1" rows="5"
cols="50" required>
</textarea></td></tr>
<tr>
<td><b>Permanent Address</b></td>
<td><b>:</b></td>
<td><textarea id="h2" name="r2" rows="5"
cols="50" required>
</textarea></td>
</tr>
<tr>
<td><b>State</b></td>
<td><b>:</b></td>
<td><input type="text" name="e1"
required></td>

</tr>
<tr>
<td><b>Country</b></td>
<td><b>:</b></td>
<td><input type="text" name="e2"
required></td>
</tr>
<tr>
<td><b>College Name</b></td>
<td><b>:</b></td>
<td><textarea id="h1" name="r1" rows="2"
cols="50" required>
</textarea></td></tr>
<tr><td><b>Field Of Study</b></td>
<td><b>:</b></td>
<td><select name="Field of Study">
<option value="Arts and Science">Arts and
Science</option>
<option value="Medicine">Medicine</option>
<option
value="Engineering">Engineering</option>
<option value="Other">Other</option>
</select></td>
</tr>
<tr>

```

```

<td><b>Year Of Studying</b></td>
<td><b>:</b></td>
<td><select name="Year of Studying">
<option value="I YEAR">I YEAR</option>
<option value="II YEAR">II YEAR</option>
<option value="III YEAR">III YEAR</option>
<option value="IV YEAR">IV YEAR</option>
<option value="Other">Other</option>
</select>
</td>
</tr>
<tr><td><b>Percentage of Pervious
Year</b></td>
<td><b>:</b></td>
<td><input type="number" name="n1">
</tr>
<tr><td><b>Ambition</b></td>
<td><b>:</b></td>
<td><textarea id="a1" row="2" cols="20"
required>
</textarea></td>
</tr>
<tr><td><b>Field Of Interest</b></td>
<td><b>:</b></td>
<td><textarea id="a1" row="2" cols="20"
required>
</textarea></td>
</tr>

<tr>
<td><b>Declaration</b></td>
<td><b>:</b></td>
<td><input type="radio" name="r1"
value="m1">"Hereby I declare that the
information given above are true to my
knowledge"</td>
</tr><br><br>
<tr>
<td align=center><input type="Submit"
value="Submit"></td>
<td>
<input type="Reset" value="Clear"></td></tr>
</table></form></center>
</body>
</html>

```

Output:

Assignment 1 x Assignment 2 x +

File | C:/Users/ELCOT/Documents/IBM/Assg-2.html

Welcome All!!

Registration Form

Name :

Password :

Email :

Gender : ☐ Male ☐ Female

Date Of Birth :

Residential Address :

Permanent Address :

State :

Country :

College Name :

Field Of Study :

Year Of Studying :

Percentage of Previous Year :

Ambition :

Field Of Interest :

Declaration : ☐ "Hereby I declare that the information given above are true to my knowledge"

Type here to search

Task View File Explorer Google Chrome Microsoft Edge Store Mail Calendar Photos Settings

Navigated Page:

Navigated Page x +

File | C:/Users/annem/OneDrive/Desktop/tth.html

"Thank You For Entering the Details"

Your Registration is successful and details were recorded

30°C Rain coming

Task View Search File Explorer Google Chrome Microsoft Edge Store Mail Calendar Photos Settings

Question -3:

Create sample program for Flask HTTP methods (list or map and Perform operations of PUT, GET,DELETE and POST.

Solution:

Flask program:

```
from flask import
Flask,redirect,url_for,request
app=Flask(__name__)
@app.route('/success/<name>')
def success(name):
    return 'welcome %s' %name
@app.route('/login',methods=['POST
','GET'])def login():
    if request.method=='POST':
        user = request.form['nm']
        return
        redirect(url_for('success',name=user)
    )else:
        user=request.args.get('nm')
        return
        redirect(url_for('success',name=user)
    )if __name__=='__main__':
    app.run(debug=True)
```


login.html:

```
<html>
<body>
<form action="#" method="post">
<p>Name:</p>
<p><input type="text" name="nm" /></p>
<p><input type="submit" value="submit"/></p>
</form>
</body>
</html>
```

Output



