Assignment -1

Batch no	11
Student Name	VIDHYASRI S
Student Reg Number	921319104219

QUESTION

Create html file

1) 4 input boxes

-name

-qualification

-age

-email

-submit button

SOLUTION

app.html

```
<!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>Document</title>
 <link rel="stylesheet" href="app.css">
</head>
<body>
 <div class="wrapper">
  <div class="form-wrapper">
   <h2 class="title">Login to Your Account</h2>
```

```html
<form id="form" class="form">
  <div class="form-group">
    <label for="name">
      Email:
    </label>
    <input id="email" type="email" placeholder="someone@gmail.com" required>
    <p id="emailError"></p>
  </div>
  <div class="form-phone">
    <label for="phone no">
      Phone No:
    </label>
    <input id="phonenumber" type="number" placeholder="Enter Phone number" required>
  </div>
  <div class="form-group">
    <label for="password">
      Password:
    </label>
    <input id="password" type="password" placeholder="Enter Password" required>
    <p id="passwordError"></p>
  </div>
  <input type="submit" value="Login">
</form>
</div>
</div>
<script src="script.js"></script>
```

</body>

    </html>

app.css

<!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>Document</title>

  <link rel="stylesheet" href="app.css">

</head>

<body>

  <div class="wrapper">

    <div class="form-wrapper">

      <h2 class="title">Login to Your Account</h2>

      <form id="form" class="form">

        <div class="form-group">

          <label for="name">

            Email:

          </label>

          <input id="email" type="email" placeholder="someone@gmail.com" required>

          <p id="emailError"></p>

        </div>

        <div class="form-phone">

          <label for="phone no">

```html
          Phone No:

        </label>

        <input id="phonenumber" type="number" placeholder="Enter Phone number" required>

       </div>

     <div class="form-group">

      <label for="password">

        Password:

       </label>

       <input id="password" type="password" placeholder="Enter Password" required>

       <p id="passwordError"></p>

      </div>

      <input type="submit" value="Login">

    </form>

   </div>

  </div>

 <script src="script.js"></script>

</body>

</html>
```