

## Assignment -1

### HTML

Assignment Date	06 September 2022
Student Name	NITISHARIHARAN K S
Student Roll Number	210419104112
Maximum Marks	2 Marks

#### Question 1:

Develop sample 4 input boxes with name ,qualification,age,submit button

HTML

```
Assessment > Nitishariharan > Assignment > assignment1.html > head
1  <head>
2  <link rel ="sytylesheet" href="styles.css">
3  <form>
4      <table>
5          <tr>
6              <td>
7                  <label for="uname">Name</label>
8              </td>
9              <td>
10                 <input type="text" id="uname" name="username">
11             </td>
12         </tr>
13         <tr>
14             <td>
15                 <label for="uemail">Email</label>
16             </td>
17             <td>
18                 <input type="text" id="uemail" name="usermail">
19                 <button type="button">Check</button>
20             </td>
21         </tr>
22         <tr>
```

```
Assessment > Nitishariharan > Assignment > assignment1.html > head > form > table > tr > td > label
24         <label for="age">Age</label>
25     </td>
26     <td>
27         <input type="text" name="userage" id="age" size="2" maxlength="2">
28     </td>
29 </tr>
30 <tr>
31     <td>
32         <label>Country</label>
33     </td>
34     <td>
35         <input type="text" value="India" name="country" disabled>
36     </td>
37 </tr>
38 <tr>
39     <td>
40         <label for="pass">Password</label>
41     </td>
42     <td>
43         <input type="password" id="pass">
44     </td>
45 </tr>
46 <tr>
```

```
48     <label for="res">Resume</label>
49   </td>
50   <td>
51     <input type="file" id="res">
52   </td>
53 </tr>
54 <tr>
55   <td>
56     <label>Hobbies</label>
57   </td>
58   <td>
59     <label>
60       <input type="checkbox" checked> Cricket
61     </label>
62     <label>
63       <input type="checkbox"> Football
64     </label>
65   </td>
66 </tr>
67 <tr>
68   <td>
69     <label>Gender</label>
70   </td>
```



```
Assessment > Nitishariharan > Assignment > assignment1.html > head > form > table > tr > td > select#city
94         <option>Faridabad</option>
95         <option>Gaziabad</option>
96     </optgroup>
97 </select>
98 </td>
99 </tr>
100 <tr>
101     <td>
102         <label>Address</label>
103     </td>
104     <td>
105         <textarea rows="4" cols="40"></textarea>
106     </td>
107 </tr>
108 <tr>
109     <td></td>
110     <td>
111         <input type="submit" value="Submit">
112         <input type="reset">
113     </td>
114 </tr>
115 </table>
116 </form>
```