Internet and Web Programming CSE3002 Fall Semester 2020-21

Lab Assignment 1

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Question:

Design a website to demonstrate the knowledge of students in HTML tags, forms, table, list and HTML frames.

- Create a user registration webpage using HTML Form elements (Input types) for a hackathon event registration. The webpage must contain the following input types to get the details of the students
- ii. # Input Types:- Textfields, Textarea, checkbox, radio button, submit button, reset button, drop down box, images (if required).
- iii. # Apply styles, Formatting tags of HTML for good design.
- iv. # Embed audio or video.
- v. # Perform form validations with HTML 5 elements.

Procedure:

<!DOCTYPE html>: Tells browser that it is an HTML document

<head>: Container for header elements

<title>: Name for toolbar

body>: Body element for document

<style>: Styles for the different elements

<h1>: Heading of level 1

align: alignment on the HTML document

<form>: Creates an HTML form for user input

action: backend script to process data

method: API request method

: Defines a table

cellpadding: Space to left on all 4 sides inside the cell

: Defines a new table row

: Defines a cell

<input>: Declare input controls that allow users to input data.

type: Defines the type of input text/radio/checkbox

name: Defines the name of the <input> element

id: Unique id to identify

pattern: Defines pattern of input data

required: Compulsory to enter

value: Defines the value of the option in radio/checkbox

<a>label>: Represents a caption for an item in a user interface

For:

<textarea>: Multi-line text input control

rows: Min no of rows

cols: Min no of cols.

<select>: Used to create dropdown list

<option>: Define options for dropdown

: Defines a paragraph

<iframe>: Defines an inline frame. Used to embed another document, in this case video

width: Defines width of element

height: Defines height of element

src: Source of media

allow: Enables extra restrictions for media hosted by iframe

allowfullscreen: Allow in full screen

Code:

```
<!DOCTYPE html>
<html lang="en">
   <meta charset="UTF-8">
   <meta name="viewport" content="width=device-width, initial-scale=1.0">
   <title>18BCE0265 IWP Lab DA - 1</title>
<style>
   body{
       background-color: rgb(20,20,20);
       font-family: Verdana, Geneva, Tahoma, sans-serif;
       color: rgb(16, 229, 125);
   h1{
       font-size: 3em;
   #nameHeading.
   #regNoHeading,
   #emailHeading,
   #mobNoHeading,
   #ideaHeading,
   #yearHeading,
   #branchHeading,
   #domainHeading{
       font-size: 1.2em;
       font-weight: 700;
       font-family: Verdana, Geneva, Tahoma, sans-serif;
   #name,
   #regNo,
   #email,
   #mobNo,
   #idea{
       height: auto;
       width: auto;
       padding: 5px 10px 5px 10px;
       text-transform: capitalize;
       background-color: rgb(20,20,20);
       border: 2px solid rgb(156,156,156);
       border-radius: 5px;
       color: white;
       font-size: 1.2em;
       font-family: Verdana, Geneva, Tahoma, sans-serif;
   #mobPrefix{
```

```
border: 1px solid rgb(156,156,156);
       border-radius: 5px;
   #first,
   #second,
   #third,
   #fourth{
       font-size: 1.2em;
       font-family: Verdana, Geneva, Tahoma, sans-serif;
</style>
   <h1 align="center">Hackathon Registration</h1>
   <form action="submit" method="post">
       <label id="nameHeading" for="name">Name</label><br>
              <input type="text" id="name" name="name" required>
           <label id="regNoHeading" for="regNo">Registration
Number</label><br>
              <input type="text" id="regNo" name="regNo" style="text-</pre>
transform: uppercase;" required>
              <label id="emailHeading" for="email">VIT Email</label><br>
              <input type="email" id="email" name="email" style="text-</pre>
transform: lowercase; pattern="[1-9]{2}[A-Z]{3}[0-9]{3}[1-9] title="Enter valid
registration number" required>
              <label id="mobNoHeading" for="mobNo">Mobile Number</label><br>
               <input type="text" id="mobNo" name="mobNo" pattern="[1-9][0-</pre>
9]{9}" title="Enter valid mobile number" required>
```

```
<label id="ideaHeading" for="ideaHeading">Idea
Description</label><br>
               <textarea type="text" id="idea" name="idea" cols="25" rows="5"
required></textarea>
               <label id="yearHeading" for="yearHeading">Year</label><br>
               <label id="first" for="">First</label>
                   <input name="year" type="radio" value="first" checked>
                   <label id="second" for="">Second</label>
                   <input name="year" type="radio" value="second">
                   <label id="third" for="">Third</label>
                   <input name="year" type="radio" value="thirst">
                   <label id="fourth" for="">Fourth</label>
                   <input name="year" type="radio" value="fourth">
                   <label id="branchHeading" for="branch">Branch</label>
               <select name="branch">
                      <option>Computer Science Engineering</option>
                      <option>Information Technology Engineering</option>
                      <option>Electronics and Communication Engineering
                      <option>Electronics and Electrical Engineering</option>
                      <option>Electronics and Instrumentation
Engineering</option>
                      <option>Civil Engineering</option>
                      <option>Chemical Engineering</option>
                      <option>Mechanical Engineering</option>
                   </select>
               <label id="domainHeading">Domain</label>
               <div id="checkbox">
```

```
<label for="">Backend</label>
                     <input name="role" class="role" type="checkbox"</pre>
value="backend">
                     <label for="">Web</label>
                     <input name="role" class="role" type="checkbox"</pre>
value="web">
                     <label for="">App</label>
                     <input name="role" type="checkbox" value="app">
                     <label for="">Designer</label>
                     <input name="role" type="checkbox" value="designer">
                     <label for="">0ther</label>
                     <input name="role" type="checkbox" value="other">
                 </div>
             <input type="submit" value="Submit">
                 <input type="reset" value="Clear">
             <iframe width="600" height="300"</pre>
src="https://www.youtube.com/embed/DPnqb74Smug" frameborder="0"
allow="accelerometer; autoplay; encrypted-media; gyroscope; picture-in-picture"
allowfullscreen></iframe>
             </form>
   <img src="./banner.jpg"height="150" align="center">
   </html>
```

Output:



