	Remark
Subject : Web Technology Lab **Name :** **P a v a n B h i k a P a t i l** **Roll No. :** 55 **Class :** S Y Comp. **Batch :** S4 **Division** : B **Expt. No. :** 04 **Date** : 17/03/2025 **Title :** Write a JavaScript to validate the following fields of employee on html form: email, name, mobile no., address, salary.	
	Signature

Code:

HTML:

```html
<!DOCTYPE html>

<html>

<head>

    <title>Reg Form</title>

    <link rel="stylesheet" type="text/css" href="style.css"> <!-- Linking the
external CSS file -->

    <script src="validation.js"></script> <!-- Linking the external JavaScript file -->

</head>

<body>

    <center><h1>Form Validation using HTML, CSS, JavaScript</h1></center>

    <hr>

    <form method="" action="" name="reg_form" onsubmit="return validate()">

        <h2>Registration Form</h2>
```

```html
<table>
  <tr>
    <td><label>First Name: </label></td>
    <td>
      <input type="text" name="fname" placeholder="First Name">
    </td>
  </tr>
  <tr>
    <td><label>Last Name: </label></td>
    <td>
      <input type="text" name="lname" placeholder="Last Name">
    </td>
  </tr>
  <tr>
    <td><label>Address: </label></td>
    <td>
      <input type="textarea" size="50" name="address" placeholder="Address">
    </td>
  </tr>
  <tr>
    <td><label>Gender: </label></td>
    <td>
      <input type="radio" name="gender" value="male">Male
      <input type="radio" name="gender" value="female">Female
    </td>
```

```html
        </tr>
        <tr>
          <td><label>Email Id: </label></td>
          <td>
             <input type="text" name="email"
placeholder="example@gmail.com">
          </td>
        </tr>
        <tr>
          <td><label>Mobile: </label></td>
          <td>
             <input type="number" name="mobile">
          </td>
        </tr>
        <tr>
          <td><label>Course: </label></td>
          <td>
            <select name="course">
               <option value="select course">select course</option>
               <option value="HTML">HTML</option>
               <option value="CSS">CSS</option>
               <option value="JavaScript">JAVASCRIPT</option>
               <option value="Java">JAVA</option>
            </select>
          </td>
        </tr>
```

```
        <tr>
          <td>
             <input type="submit" name="submit" value="Submit">
             <input type="reset" name="reset" value="Reset">
          </td>
        </tr>
      </table>
   </form>
</body>
</html>
```

CSS:
```css
body {
   font-family: Calibri;
}

input[type="text"], input[type="number"], select {
   width: 250px;
}

input[type="submit"], input[type="reset"] {
   width: 77px;
   height: 27px;
   position: relative;
```

```css
    left: 180px;
  }

  form {
    text-align: center;
    font-family: Calibri;
    font-size: 20px;
    border: 3px solid black;
    width: 600px;
    margin: 20px auto;
  }

  td {
    padding: 10px;
  }

  td:first-child {
    text-align: right;
    font-weight: bold;
  }

  td:last-child {
    text-align: left;
  }
```

JavaScript Code:

```javascript
function validate() {

    var fname = document.reg_form.fname;

    var lname = document.reg_form.lname;

    var address = document.reg_form.address;

    var gender = document.reg_form.gender;

    var email = document.reg_form.email;

    var mobile = document.reg_form.mobile;

    var course = document.reg_form.course;



    if (fname.value.length <= 0) {

        alert("First Name is required");

        fname.focus();

        return false;

    }


    if (lname.value.length <= 0) {

        alert("Last Name is required");

        lname.focus();

        return false;

    }


    if (address.value.length <= 0) {
```

```javascript
      alert("Address is required");

      address.focus();

      return false;

   }


   if (!document.reg_form.gender[0].checked &&
!document.reg_form.gender[1].checked) {

      alert("Gender is required");

      return false;

   }



   var emailPattern = /^[a-zA-Z0-9._-]+@[a-zA-Z0-9.-]+\.[a-zA-Z]{2,6}$/;

   if (!emailPattern.test(email.value)) {

      alert("Please enter a valid email address");

      email.focus();

      return false;

   }


   if (mobile.value.length != 10) {

      alert("Please enter a valid 10-digit mobile number");

      mobile.focus();

      return false;

   }


   if (course.value == "select course") {
```

```
        alert("Please select a course");

        return false;

    }


    return true;

}
```

Output:

Form Validation

Registration Form

First Name:	Pavan
Last Name:	Patil
Address:	Mohadi upnagar, dhule 424111
Gender:	⦿ Male ○ Female
Email:	pavan.patil82@svkmmumbai.onmicrosoft.
Mobile:	9309961272
Course:	CSS

[Submit]   [Reset]