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SMARTBRIDGE EXTERNSHIP

Modern Application Development (Java Spring Boot)

ASSIGNMENT - 1

NAME: Hrithik G

REG.NO: 20BCE1890

1. **Create one form with input and apply css for that.**

```
<!--Hrithik G 20BCE1890-->

<!DOCTYPE html>

<html>

<head>

    <style>

        body {

            background-image:

url("https://ceblog.s3.amazonaws.com/wp-content/uploads/201

7/09/19114623/forms.png");

            font-family: Arial, sans-serif;

            background-color: #f4f4f4;

            margin: 0;

            padding: 20px;

        }

        h1 {

            color: #333;

            text-align: center;

        }

        form {
```

```
    max-width: 400px;

    margin: 0 auto;

    background-color: #fff;

    padding: 20px;

    border-radius: 5px;

    box-shadow: 0 0 10px rgba(0, 0, 0, 0.1);
}

label {

    display: block;

    margin-bottom: 10px;

    color: #666;
}

input[type="text"],
input[type="date"] {

    width: 100%;

    padding: 8px;

    border: 1px solid #ccc;

    border-radius: 4px;

    box-sizing: border-box;
}

input[type="submit"] {

    background-color: #4CAF50;

    color: white;

    padding: 10px 20px;

    border: none;
```

```
        border-radius: 4px;

        cursor: pointer;

        font-size: 16px;
    }

    input[type="submit"]:hover {

        background-color: #45a049;

    }

    .btn{

        text-align: center;

    }

</style>
</head>
<body>

    <h1>Student Registration Form</h1>

    <h4 align="center">Assignment-1 Java spring boot</h4>

    <form name="Studentinfo" method="post">

        <label for="name">Name:</label>

        <input type="text" id="name" name="name" required>

        <label for="dob">Date of Birth:</label>

        <input type="date" id="dob" name="dob" required>

        <label for="university">University:</label>

        <input type="text" id="university" name="university"
required>

        <label for="campus">Campus:</label>

        <input type="text" id="campus" name="campus" required>
```

```
<label for="registration-number">Registration  
Number:</label>  
  
<input type="text" id="registration-number"  
name="registration-number" required>  
  
<div class="btn">  
    <input type="submit" value="Submit">  
</div>  
</form>  
</body>  
</html>
```

OUTPUT:

Student Registration Form

Assignment-1 Java spring boot

Name:

Date of Birth:

University:

Campus:

Registration Number: