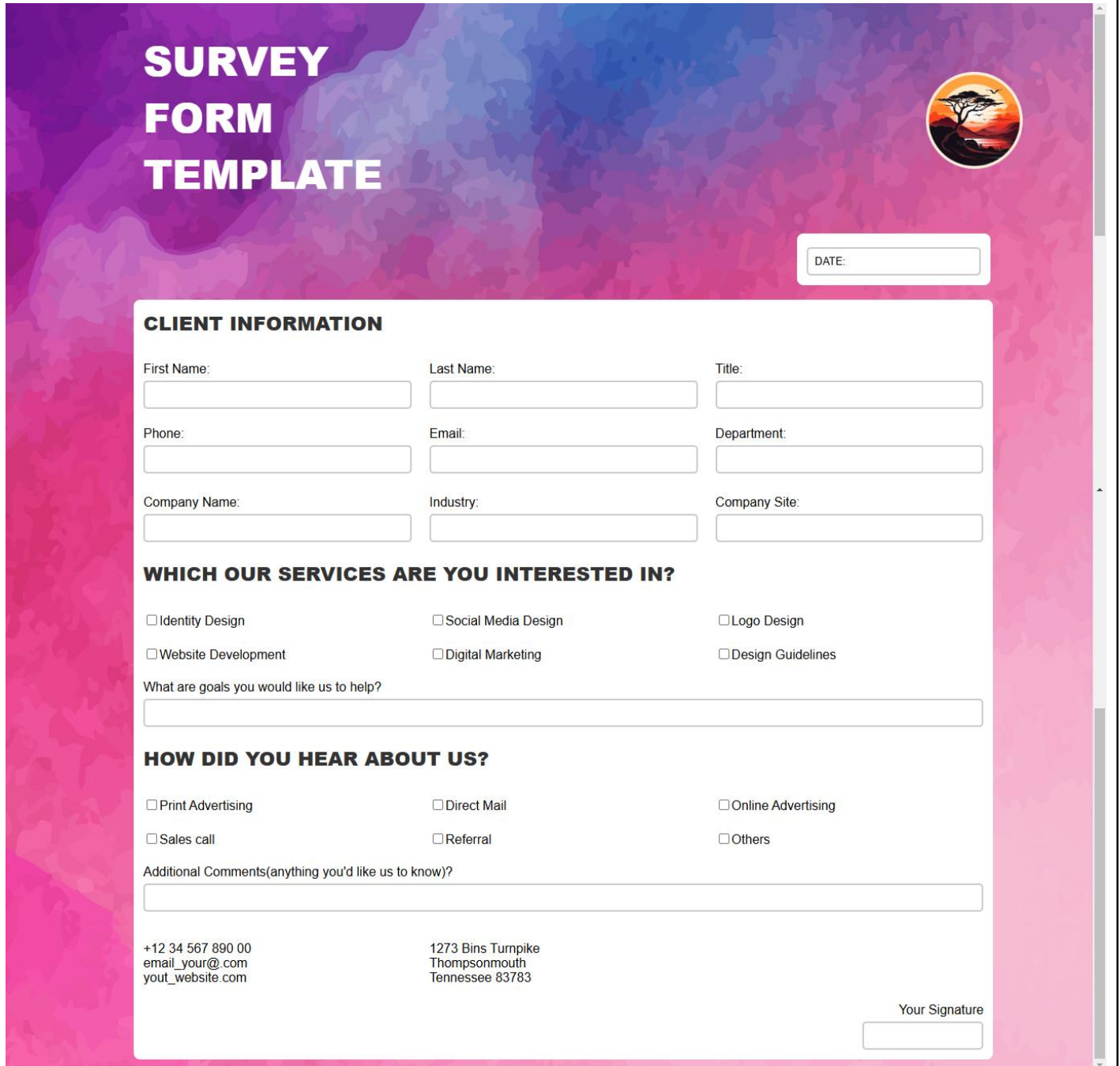


SURVEY FORM TASK

SCREENSHOTS:



The screenshot shows a web browser displaying a survey form titled "SURVEY FORM TEMPLATE". The background is a vibrant purple and pink abstract pattern. In the top right corner, there is a circular logo featuring a silhouette of a tree against a sunset. Below the title, there is a "DATE:" input field. The main content area is a white box with a black border, containing the following sections:

- CLIENT INFORMATION**
 - First Name:
 - Last Name:
 - Title:
 - Phone:
 - Email:
 - Department:
 - Company Name:
 - Industry:
 - Company Site:
- WHICH OUR SERVICES ARE YOU INTERESTED IN?**
 - ☐ Identity Design
 - ☐ Social Media Design
 - ☐ Logo Design
 - ☐ Website Development
 - ☐ Digital Marketing
 - ☐ Design Guidelines
- What are goals you would like us to help?
- HOW DID YOU HEAR ABOUT US?**
 - ☐ Print Advertising
 - ☐ Direct Mail
 - ☐ Online Advertising
 - ☐ Sales call
 - ☐ Referral
 - ☐ Others
- Additional Comments(anything you'd like us to know)?
- Contact Information:
 - +12 34 567 890 00
 - email_your@.com
 - yout_website.com
 - 1273 Bins Turnpike
 - Thompsonmouth
 - Tennessee 83783
- Your Signature

CODE FOR THE ABOVE SURVEY USING HTML:

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
```

```
<meta name="viewport" content="width=device-width, initial-scale=1.0">
<title>SURVEY FORM</title>
<style>
  body {
    font-family: Arial, sans-serif;
    background-color: #e3f1f1;
    display: flex;
    justify-content: center;
    align-items: center;
    flex-direction: column;
    margin: 0;
    padding: 0;
  }
  h1 {
    font-size: 50px;
    font-family: 'Arial Black', sans-serif;
    color: #333;
    text-align: center;
    margin-bottom: 20px;
  }
  h2 {
    font-family: 'Arial Black', sans-serif;
    color: #333;
    margin-bottom: 10px;
  }
  table {
    width: 80%;
    background-color: white;
    border-radius: 8px;
    padding: 20px;
    margin: 20px auto;
    box-shadow: 0px 4px 8px rgba(0,0,0,0.1);
  }
  td {
    padding: 10px;
  }
  input[type="text"], input[type="email"] {
    width: 100%;
    padding: 8px;
```

```

        margin-top: 5px;
        border-radius: 5px;
        border: 2px solid #ccc;
    }
    .centered {
        display: flex;
        justify-content: center;
    }
    .signature {
        text-align: right;
    }
</style>
</head>
<body>
    <h1>SURVEY FORM TEMPLATE</h1>
    <div class="centered">
        
    </div>

    <table>
        <tr>
            <td colspan="3" class="centered"><input type="text" name="date"
placeholder="DATE:"></td>
        </tr>
    </table>

    <form>
        <table>
            <tr>
                <td colspan="3"><h2>CLIENT INFORMATION</h2></td>
            </tr>
            <tr>
                <td>First Name:<br><input type="text" name="firstname"></td>
                <td>Last Name:<br><input type="text" name="lastname"></td>
                <td>Title:<br><input type="text" name="title"></td>
            </tr>
            <tr>
                <td>Phone:<br><input type="text" name="phone"></td>

```

```

        <td>Email:<br><input type="email" name="email"></td>
        <td>Department:<br><input type="text" name="department"></td>
    </tr>
    <tr>
        <td>Company Name:<br><input type="text" name="company"></td>
        <td>Industry:<br><input type="text" name="industry"></td>
        <td>Company Site:<br><input type="text" name="site"></td>
    </tr>
    <tr>
        <td colspan="3"><h2>WHICH OF OUR SERVICES ARE YOU INTERESTED
IN?</h2></td>
    </tr>
    <tr>
        <td><input type="checkbox" name="services"> Identity Design</td>
        <td><input type="checkbox" name="services"> Social Media
Design</td>
        <td><input type="checkbox" name="services"> Logo Design</td>
    </tr>
    <tr>
        <td><input type="checkbox" name="services"> Website
Development</td>
        <td><input type="checkbox" name="services"> Digital Marketing</td>
        <td><input type="checkbox" name="services"> Design Guidelines</td>
    </tr>
    <tr>
        <td colspan="3">What goals would you like us to help with?<br><input
type="text" name="goals"></td>
    </tr>
    <tr>
        <td colspan="3"><h2>HOW DID YOU HEAR ABOUT US?</h2></td>
    </tr>
    <tr>
        <td><input type="checkbox" name="about"> Print Advertising</td>
        <td><input type="checkbox" name="about"> Direct Mail</td>
        <td><input type="checkbox" name="about"> Online Advertising</td>
    </tr>
    <tr>
        <td><input type="checkbox" name="about"> Sales Call</td>
        <td><input type="checkbox" name="about"> Referral</td>

```

```
<td><input type="checkbox" name="about"> Others</td>
</tr>
<tr>
  <td colspan="3">Additional Comments (anything you'd like us to
know)?<br><input type="text" name="comments"></td>
</tr>
<tr>
  <td>+12          34          567          890
00<br>email@example.com<br>your_website.com</td>
  <td>1273      Bins      Turnpike<br>Thompsonmouth<br>Tennessee
83783</td>
  <td class="signature">Your      Signature<br><input      type="text"
name="sign" style="width: 150px;"></td>
</tr>
</table>
</form>
</body>
</html>
```