

# 231FA04957

## A.Sathwik

### FEAD assignment 1

<html>

<head>

<meta charset="UTF-8">

<h1> School Admission Form</h1>

</head>

<body>

<forms>

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

<input type Name:="text"><br><br>

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

<input type Name:="text"><br><br>

<label for="name">email add:</label>

<input type Name:="email"><br><br>

<label for="male">Gender:</label>

<input type="radio">Male<input  
type="radio">Female<br><br>

<label for="Date of birth"> Age :</label>

<input type="date"><br><br>

<label for="number">Number:</label>

<input type="number"><br><br>

<label for="checkbox">Language:</label>

<input type="Checkbox">Telugu<input type="checkbox">

English<input type="checkbox">Hindi<br><br>

<label for="file">add File:</label>

<input type="file"><br><br>

<label for="color">Fav Colour:</label>

<input type="color"><br><br>

<label for="Time">Class Timings:</label>

<input type="Time"><br><br>

<label for="passwd">password:</label>

<input type="password"><br><br>

<h2>Home address</h2>

<label for="name">City/Town:</label>

<input type="text"><br><br>

<label for="number">Street:</label>

<input type="text"><br><br>

<input type="reset">

<input type="submit">

</forms></body></html>

## School Admission Form

First Name:

Last Name:

email add:

Gender: ☐ Male ☐ Female

Age :

Number:

Language: ☐ Telugu ☐ English ☐ Hindi

add File:  No file chosen

Fav Colour:

Class Timings:

password:

### Home address

City/Town:

Street: