**Assignment 2: Design a HTML form for student registration**

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**Class: TY IT**

**Roll No: 2**

**Batch: 3**

**Code:**

<!-- Design a HTML form for student registration and perform validation using JavaScript. -->

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8" />

<meta http-equiv="X-UA-Compatible" content="IE=edge" />

<meta name="viewport" content="width=device-width, initial-scale=1.0" />

<title>Student Registration</title>

<style>

body {

background-color: dodgerblue;

text-align: center;

}

</style>

</head>

<body>

<h1

style="

text-align: center;

text-transform: uppercase;

text-decoration: overline;

"

>

Student Registration

</h1>

<form action="/action.php" target="\_blank" method="get" autocomplete="off">

<fieldset>

<legend>Information:</legend>

<label>First Name:</label>

<input

type="text"

id="firstName"

placeholder="First Name "

minlength="3"

required

autofocus

/><br /><br />

<label>Last Name: </label>

<input

type="text"

id="lastName"

placeholder="Last Name"

minlength="3"

required

/><br /><br />

<label>Gender:</label><br />

<input type="radio" id="male" name="gender" value="male" />

<label for="male">Male</label><br />

<input type="radio" id="female" name="gender" value="female" />

<label for="female">Female</label><br />

<input type="radio" id="other" name="gender" value="other" />

<label for="other">Other</label><br /><br />

<label for="birthday">Birthday:</label>

<input type="date" id="birthday" name="birthday" /><br /><br />

<label for="year">Year:</label>

<input list="year" />

<datalist id="year">

<option value="F.Y."></option>

<option value="S.Y."></option>

<option value="T.Y."></option>

<option value="B.Tech"></option></datalist

><br /><br />

<label>Email:</label>

<input

type="email"

id="email"

placeholder="abc@something.com"

maxlength="100"

required

/><br /><br />

<label>Phone No:</label>

<input

type="number"

id="phone"

placeholder="Phone"

maxlength="10"

required

/><br />

<br />

<label for="subject">Optional Subject:</label>

<select name="subject" id="subject">

<optgroup label="For S.Y.">

<option value="web">Web Technology</option>

<option value="cloud">Cloud Computing</option>

</optgroup>

<optgroup label="For T.Y">

<option value="imageprocessing">Image Processing</option>

<option value="ml">M.L.</option>

</optgroup>

</select>

<br /><br />

<label>No Backlogs:</label>

<input

type="checkbox"

id="deadbacklog"

name="deadbacklog"

value="deadbacklog"

/>

<label>Active Backlogs(if any):</label>

<input type="number" id="quantity" name="quantity" min="0" max="5" />

<br /><br />

<label for="study">Preferred Mode of Study:</label>

<select id="study" name="cars">

<option value="online">Online</option>

<option value="offline" selected>Offline</option></select

><br /><br />

<label for="myfile">Upload Marksheet:</label>

<input type="file" id="myfile" name="myfile" /><br /><br />

<label>Your Description:</label>

<textarea rows="5" cols="30">Description..</textarea><br />

<button type="submit" onclick="alert('Form Submitted Successfully')">

Submit

</button>

<input type="reset" />

</fieldset>

</form>

</body>

</html>

Output:

