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# **Bootstrap4**

## **- Forms -**

# Forms

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## ❖ Stacked Form

Email:

Password:

☐ Remember me

# Forms

## ❖ Stacked Form

```
<form >
  <div class="form-group">
    <label for="email">Email address:</label>
    <input type="email" class="form-control" id="email">
  </div>
  <div class="form-group">
    <label for="pwd">Password:</label>
    <input type="password" class="form-control" id="pwd">
  </div>
  <div class="form-group form-check">
    <label class="form-check-label">
      <input class="form-check-input" type="checkbox"> Remember me
    </label>
  </div>
  <button type="submit" class="btn btn-primary">Submit</button>
</form>
```

# Forms

## ❖ Inline Form

Email:  Password:  ☐ Remember me

```
<form class="form-inline" action="/action_page.php">
  <label for="email">Email address:</label>
  <input type="email" class="form-control" id="email">
  <label for="pwd">Password:</label>
  <input type="password" class="form-control" id="pwd">
  <div class="form-check">
    <label class="form-check-label">
      <input class="form-check-input" type="checkbox"> Remember me
    </label>
  </div>
  <button type="submit" class="btn btn-primary">Submit</button>
</form>
```

# Forms

## ❖ 여백주기

Email:  Password:  ☐ Remember me

```
<form class="form-inline" action="/action_page.php">
  <label for="email" class="mr-sm-2">Email address:</label>
  <input type="email" class="form-control mb-2 mr-sm-2" id="email">
  <label for="pwd" class="mr-sm-2">Password:</label>
  <input type="password" class="form-control mb-2 mr-sm-2" id="pwd">
  <div class="form-check mb-2 mr-sm-2">
    <label class="form-check-label">
      <input class="form-check-input" type="checkbox"> Remember me
    </label>
  </div>
  <button type="submit" class="btn btn-primary mb-2">Submit</button>
</form>
```

# Input

---

## ❖ Input

Name:

Password:

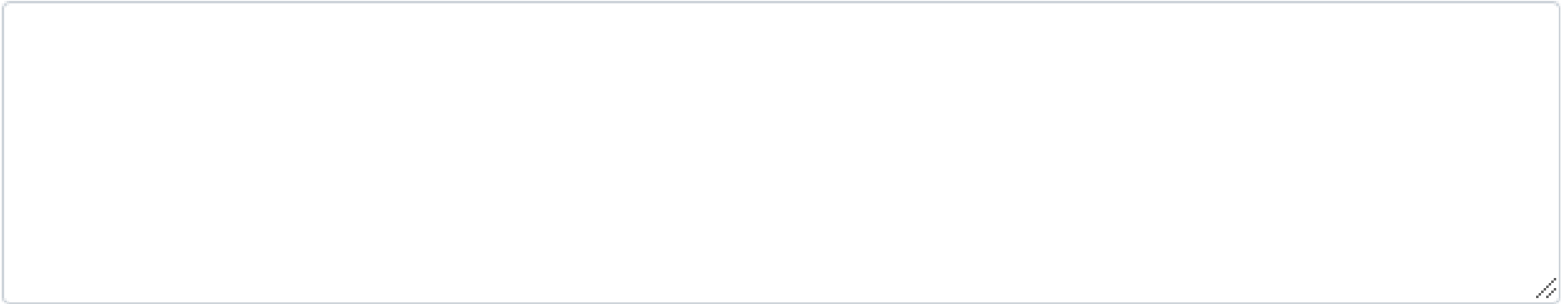
```
<div class="form-group">
  <label for="usr">Name:</label>
  <input type="text" class="form-control" id="usr">
</div>
<div class="form-group">
  <label for="pwd">Password:</label>
  <input type="password" class="form-control" id="pwd">
</div>
```

# Input

---

## ❖ Textarea

Comment:



```
<div class="form-group">  
  <label for="comment">Comment:</label>  
  <textarea class="form-control" rows="5" id="comment"></textarea>  
</div>
```

# Input

---

## ❖ Checkboxes

- ☐ Option 1
- ☐ Option 2
- ☐ Option 3

```
<div class="form-check">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input" value="">Option 1
  </label>
</div>
<div class="form-check">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input" value="">Option 2
  </label>
</div>
<div class="form-check disabled">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input"
      value="" disabled>Option 3
  </label>
</div>
```



# Input

---

## ❖ Inline Checkboxes

☐ Option 1   ☐ Option 2   ☐ Option 3

```
<div class="form-check-inline">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input" value="">Option 1
  </label>
</div>
<div class="form-check-inline">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input" value="">Option 2
  </label>
</div>
<div class="form-check-inline disabled">
  <label class="form-check-label">
    <input type="checkbox" class="form-check-input" value=""
disabled>Option 3
  </label>
</div>
```

# Input

---

## ❖ Radio Buttons

- ☐ Option 1
- ☐ Option 2
- ☐ Option 3

```
<div class="form-check">
  <label class="form-check-label">
    <input type="radio" class="form-check-input"
      name="optradio">Option 1</label>
  </div>
<div class="form-check">
  <label class="form-check-label">
    <input type="radio" class="form-check-input"
      name="optradio">Option 2</label>
  </div>
<div class="form-check disabled">
  <label class="form-check-label">
    <input type="radio" class="form-check-input" name="optradio"
      disabled>Option 3</label>
  </div>
```

# Input

---

## ❖ Radio Buttons

☐ Option 1   ☐ Option 2   ☐ Option 3

```
<div class="form-check-inline">
  <label class="form-check-label">
    <input type="radio" class="form-check-input"
      name="optradio">Option 1</label>
</div>
<div class="form-check-inline">
  <label class="form-check-label">
    <input type="radio" class="form-check-input"
      name="optradio">Option 2</label>
</div>
<div class="form-check-inline disabled">
  <label class="form-check-label">
    <input type="radio" class="form-check-input" name="optradio"
      disabled>Option 3</label>
</div>
```

# Input

---

## ❖ Select List

1  
2  
3  
4  
5

```
<div class="form-group">  
  <label for="sel1">Select list:</label>  
  <select class="form-control" id="sel1">  
    <option>1</option>  
    <option>2</option>  
    <option>3</option>  
    <option>4</option>  
  </select>  
</div>
```

# Input

---

## ❖ Control Sizing

- `.form-control-sm`, `.form-control-lg`

Small form control

Default form control

Large form control

```
<input type="text" class="form-control form-control-sm">  
<input type="text" class="form-control ">  
<input type="text" class="form-control form-control-lg">
```

# Input

---

## ❖ Plain Text

Default form control

Form control with plain text

```
<div class="form-group">
  <input type="text" class="form-control"
    placeholder="Default form control" name="text1">
</div>
<div class="form-group">
  <input type="text" class="form-control-plaintext"
    placeholder="Form control with plain text" name="text2">
</div>
```

# Input

## ❖ File and Range

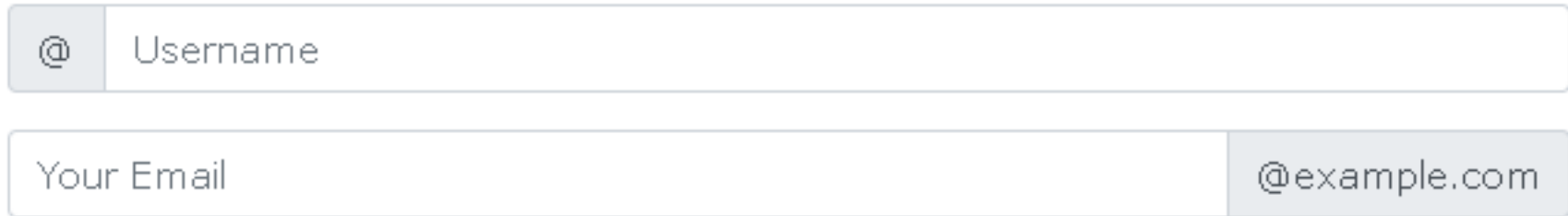


파일 선택    선택된 파일 없음

```
<input type="range" class="form-control-range">  
<input type="file" class="form-control-file border">
```

# Input Groups

## ❖ Input Groups



Two examples of Bootstrap input groups. The first example shows a text input with a placeholder 'Username' and a '@' symbol prepended to the left. The second example shows a text input with a placeholder 'Your Email' and '@example.com' appended to the right.

```
<form>
  <div class="input-group mb-3">
    <div class="input-group-prepend">
      <span class="input-group-text">@</span>
    </div>
    <input type="text" class="form-control" placeholder="Username">
  </div>

  <div class="input-group mb-3">
    <input type="text" class="form-control" placeholder="Your Email">
    <div class="input-group-append">
      <span class="input-group-text">@example.com</span>
    </div>
  </div>
</form>
```



# Input Groups

---

## ❖ Input Group Sizing

- `.input-group-sm`, `.input-group-lg`

Small

Default

Large

```
<form>
  <div class="input-group mb-3 input-group-sm">
    :
  </div>
  <div class="input-group mb-3">
    :
  <div class="input-group mb-3 input-group-lg">
    :
  </div>
</form>
```

# Input Groups

---

## ❖ Multiple Inputs and Helpers

Person	First Name	Last Name
--------	------------	-----------

```
<form>
  <div class="input-group mb-3">
    <div class="input-group-prepend">
      <span class="input-group-text">Person</span>
    </div>
    <input type="text" class="form-control" placeholder="First Name">
    <input type="text" class="form-control" placeholder="Last Name">
  </div>
</form>
```

# Input Groups

---

## ❖ Multiple Inputs and Helpers



```
<!-- Multiple addons / help text -->
<form>
  <div class="input-group mb-3">
    <div class="input-group-prepend">
      <span class="input-group-text">One</span>
      <span class="input-group-text">Two</span>
      <span class="input-group-text">Three</span>
    </div>
    <input type="text" class="form-control">
  </div>
</form>
```

# Input Groups

## ❖ Input Group with Checkboxes and Radios

☒ Some text

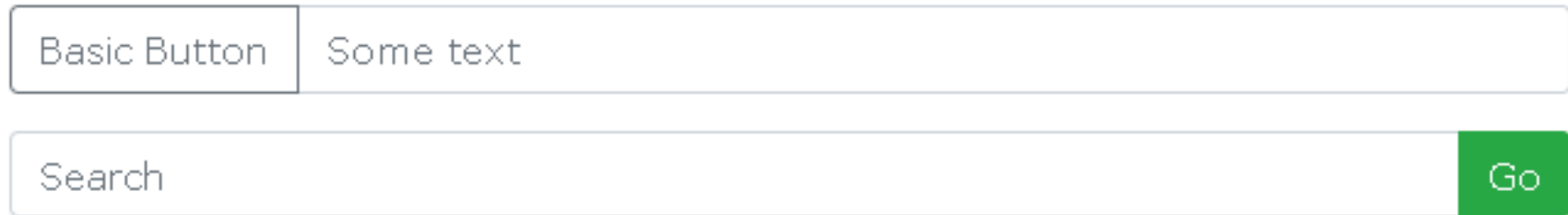
☐ Some text

```
<div class="input-group mb-3">
  <div class="input-group-prepend">
    <div class="input-group-text"><input type="checkbox"></div>
  </div>
  <input type="text" class="form-control" placeholder="Some text">
</div>
```

```
<div class="input-group mb-3">
  <div class="input-group-prepend">
    <div class="input-group-text"><input type="radio"></div>
  </div>
  <input type="text" class="form-control" placeholder="Some text">
</div>
```

# Input Groups

## ❖ Input Group Buttons



Basic Button    Some text

Search    Go

```
<div class="input-group mb-3">
  <div class="input-group-prepend">
    <button class="btn btn-outline-secondary" type="button">
      Basic Button</button>
    </div>
  <input type="text" class="form-control" placeholder="Some text">
</div>
```

```
<div class="input-group mb-3">
  <input type="text" class="form-control" placeholder="Search">
  <div class="input-group-append">
    <button class="btn btn-success" type="submit">Go</button>
  </div>
</div>
```

# Input Groups

---

## ❖ Input Group Buttons



```
<div class="input-group mb-3">
  <input type="text" class="form-control"
    placeholder="Something clever..">
  <div class="input-group-append">
    <button class="btn btn-primary" type="button">OK</button>
    <button class="btn btn-danger" type="button">Cancel</button>
  </div>
</div>
```

# Input Groups

## ❖ Input Group with Dropdown Button



```
<div class="input-group mt-3 mb-3">
  <div class="input-group-prepend">
    <button type="button"
      class="btn btn-outline-secondary dropdown-toggle"
      data-toggle="dropdown">
      Dropdown button
    </button>
    <div class="dropdown-menu">
      <a class="dropdown-item" href="#">Link 1</a>
      <a class="dropdown-item" href="#">Link 2</a>
      <a class="dropdown-item" href="#">Link 3</a>
    </div>
  </div>
  <input type="text" class="form-control" placeholder="Username">
</div>
```

# Input Groups

---

## ❖ Input Group Labels

Write your email here:

@example.com

```
<label for="demo">Write your email here:</label>
<div class="input-group mb-3">
  <input type="text" class="form-control" placeholder="Email"
    id="demo" name="email">
  <div class="input-group-append">
    <span class="input-group-text">@example.com</span>
  </div>
</div>
```