

## Home Work Class 13 (August 16)

Create the HTML form like below. The start time and End time are drop down list (see 2<sup>nd</sup> image for clarification). Event Type is also a drop down (see 3<sup>rd</sup> image for clarification). When the user clicks “Next” button, you need to check the values of each and every field in this form and display the error message accordingly (see 4<sup>th</sup> image for which message needs to be displayed and where). Make sure the error messages are not display when the page is loaded. They are only displayed when the user clicks “Next” button and there is no value present in the fields. Once the users fill the value and clicks “Next” again, the error message must go away (hide).

# Event Resource Request Form

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|                                     |  |
|-------------------------------------|--|
| Event Name                          | <input type="text"/>   |
| Event Date                          | <input type="text"/>   |
| Start Time                          | <input type="text" value="▼"/>   |
| End Time                            | <input type="text" value="▼"/>   |
| Event Type                          | <input type="text" value="▼"/>   |
| Space To Be Used                    | <input type="checkbox"/> Basement Lobby<br><input type="checkbox"/> Class Rooms<br><input type="checkbox"/> Other<br><input type="checkbox"/> Shoe Court Area<br><input type="checkbox"/> Social Lobby |
| No Of People Attending              | <input type="text"/>   |
| Contact Person Name                 | <input type="text"/>   |
| Contact Person Phone                | <input type="text"/>   |
| Contact Person Email                | <input type="text"/>   |
| How much is your Approved Budget?   | <input type="text"/>   |
| <input type="button" value="Next"/> |  |

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*Image 1*

|                            |                        |
|----------------------------|------------------------|
| Start Time                 | <div><div></div></div> |
| End Time                   | 12:00 AM               |
| Event Type                 | 12:30 AM               |
| To Be Used                 | 1:00 AM                |
|                            | 1:30 AM                |
|                            | 2:00 AM                |
|                            | 2:30 AM                |
|                            | 3:00 AM                |
|                            | 3:30 AM                |
|                            | 4:00 AM                |
|                            | 4:30 AM                |
| le Attending               | 5:00 AM                |
| erson Name                 | 5:30 AM                |
|                            | 6:00 AM                |
|                            | 6:30 AM                |
| erson Phone                | 7:00 AM                |
|                            | 7:30 AM                |
| erson Email                | 8:00 AM                |
|                            | 8:30 AM                |
| nuch is your<br>ed Budget? | 9:00 AM                |

Image 2

|                |                        |
|----------------|------------------------|
| Event Type     | <div><div></div></div> |
| ace To Be Used | Concert                |
|                | Comedy Show            |
|                | Movie Night            |
|                | Game Night             |
|                | Cultural Show          |

Image 3

|                                      |  |                                    |
|--------------------------------------|--|------------------------------------|
| Event Name                           | <input type="text"/>   | Event Name is required             |
| Event Date                           | <input type="text"/>   | Event Date is required             |
| Start Time                           | <input type="text"/>   | Start Time is required             |
| End Time                             | <input type="text"/>   | End Time is required               |
| Event Type                           | <input type="text"/>   | Select an Institution              |
| Space To Be Used                     | <input type="checkbox"/> Basement Lobby<br><input type="checkbox"/> Class Rooms<br><input type="checkbox"/> Other<br><input type="checkbox"/> Shoe Court Area<br><input type="checkbox"/> Social Lobby | Space to be used is required       |
| No Of People Attending               | <input type="text"/>   | No of People Attending is required |
| Contact Person Name                  | <input type="text"/>   | Contact Name is required           |
| Contact Person Phone                 | <input type="text"/>   | Contact Phone is required          |
| Contact Person Email                 | <input type="text"/>   | Contact Email is required          |
| How much is your<br>Approved Budget? | <input type="text"/>   | Budget is required.                |
| <input type="button" value="Next"/>  |  |                                    |

Image 4