

WebTechLab_sem4\exp5\exp5b.html

```

<!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>Practical_5B</title>
</head>
<style>
  textarea {
    overflow-y: scroll;
    height: 80px;
  }
</style>
<body>
  <h1 style="text-align: center;">Feedback</h1>
  <p>You can help us to improve our website by using the following form to let us know or
  what you think or what needs to be changed</p>
  <form class = "prac_5b" action="out.html">
    <table>
      <tr>
        <td><label for="name"><b>Name:</b></label></td>
        <td><input type="text" id="name" name="name"></td>
      </tr>
      <tr>
        <td><label for="email_address"><b>Email Address:</b></label></td>
        <td><input type="text" id="address" name="address"></td>
      </tr>
      <tr>
        <td rowspan="4"><label for="age"><b>Your Age:</b></label></td>
        <td>
          <input type="radio" id="1" name="sub_1">
          <label for="1"><=20</label>
        </td>
      </tr>
      <tr>
        <td>
          <input type="radio" id="2" name="sub_2">
          <label for="2">21-30</label>
        </td>
      </tr>
      <tr>
        <td>
          <input type="radio" id="3" name="sub_2">
          <label for="3">31-40</label>
        </td>
      </tr>
      <tr>
        <td>
          <input type="radio" id="4" name="sub_2">
          <label for="4">>40</label>
        </td>
      </tr>
      <tr>
        <td><label for="state"><b>Your State:</b></label></td>
        <td>

```

```
<select name="state" id="state">
  <option value="none" selected disabled hidden>Select a State</option>
  <option value="1">Himachal Pradesh</option>
  <option value="2">Uttar Pradesh</option>
  <option value="3">Arunachal Pradesh</option>
  <option value="4">Assam</option>
</select>
</td>
</tr>
<tr>
  <td><label for="find"><b>How did you find our site:</b></label></td>
  <td><textarea id="find" name="find" rows="4" cols="35" placeholder="Write
here..."></textarea></td>
</tr>
<tr>
  <td><label for="site"><b>Site Suggestions:</b></label></td>
  <td><textarea id="site" name="site" rows="4" cols="35" placeholder="Type your
suggestion here..."></textarea></td>
</tr>
<tr>
  <td><label for="comment"><b>Other Comments:</b></label></td>
  <td><textarea id="comment" name="comment" rows="4" cols="35"
placeholder="Additional Comments here..."></textarea></td>
</tr>
</table>
<br><br>
<input type="submit" value="Submit">
<input type="reset" value="Reset">
</form>
</body>
</html>
```