

Practical : 6

AIM: Make personal details form.

CODE:

```

pd - Notepad
File Edit Format View Help
<html>
<head><title>personal details</title></head>
<body>
<font face="arial"><br>
PERSONAL DETAILS<br><br>
Full Name* </b> <input type="text" id="fn" name="fn" required> <br>
First Name <input type="text" id="fn" name="fn" required> <br>
Middle Name <input type="text" id="fn" name="fn" required> <br>
Last Name<br>
<input type="text" id="fn" name="fn" required> <br>
<input type="text" id="fn" name="fn" required><br><br>
<br>
Birthday(dd/mm/yyyy)* <input type="date" required> <br>
Gender* <input type="radio" value="f">Female<input type="radio" value="m">Male<input type="radio" value="o">Others <br>
Age(In Year)* <input type="text" required> <br>
Place of Birth* <input type="text" required> <br>
Marital Status* <select name="c" id="c">
<option value=" " --</option>
<option value="m">married</option>
<option value="s">single</option>
</select>
No. of children* <input type="number" required> <br>
Aadhar No.* <input type="number" required> <br>
Contact No.* <input type="number" required> <br>
Alternate No.* <input type="number" required> <br>
Email ID* <input type="text" required> <br>
Country* <select name="c" id="c">
<option value=" " --</option>
<option value="india">india</option>
<option value="china">china</option>
<option value="japan">japan</option>
</select> <br>
Present Address* <input type="text" required> <br>
Permanent Address* <input type="text" required> <br>
</font>
</body>
</html>

```

OUTPUT:

personal details

File | D:/E/pd.html

PERSONAL DETAILS

Full Name*

First Name

Middle Name

Last Name

Birthday(dd/mm/yyyy)*

dd---- -yyyy

Gender*

☐ Female
☐ Male
☐ Others

Age(In Year)*

Place of Birth*

Marital Status*

--

No. of children*

Aadhar No.*

PAN No.*

Contact No.*

Alternate No.*

Email ID*

Country*

--

Present Address*

Permanent Address*

(code that is visible to eyes)

```
<html>
<head><title>personal details</title></head>
<body>
<font face="arial"><b>
PERSONAL DETAILS<br><br>
Full Name* </b>    &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;    &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
First Name &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
Middle Name &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp;
Last Name<br>
   &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; <input type="text" id="fn" name="fn"
required> &nbsp; &nbsp; &nbsp; &nbsp;
   <input type="text" id="fn" name="fn" required> &nbsp; &nbsp; &nbsp; &nbsp;
   <input type="text" id="fn" name="fn" required><br><br>
<b>
Birthday(dd/mm/yyyy)* &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
<input type="date" required> &nbsp; &nbsp; &nbsp; &nbsp;

   &nbsp;Gender*</b> &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; <input type="radio">Female<input type="radio">Male<input type="radio">Others
<br><br>

<b>Age(In Year)* &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; <input type="text" required> &nbsp; &nbsp;

   &nbsp; &nbsp; Place of Birth* &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; <input
type="text" required><br><br>

Marital Status* &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp; &nbsp; &nbsp; &nbsp; &nbsp; <select name="c" id="c" ><br>
   <option value="" >--</option>
   <option value="m">married</option>
   <option value="s">single</option>

</select>

   &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp;
&nbsp;

No. of children* &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; &nbsp; <input type="number"
required><br><br>
```

Aadhar No.* <input type="number" required>

PAN No.* <input type="text" required>

Contact No.* <input type="number" required>

Alternate No.* <input type="number" required>

Email ID* <input type="text">

Country* <select name="c" id="c">

 <option value="">--</option>
 <option value="india">india</option>
 <option value="china">china</option>
 <option value="japan">japan</option>
 </select>

Present Address* <input type="textbox" required>

Permanent Address* <input type="textbox" required>

 </body>
 </html>