

## WEEK 1 ASSESSMENT

### Modern Application Development (Java Spring Boot)

Name: LADE VIVEK

Reg.no: 20BCE0432

Mail: [lade.vivek2020@vitstudent.ac.in](mailto:lade.vivek2020@vitstudent.ac.in)

## CODE:

```
<!DOCTYPE html>
<html>
<head>
  <title>Week 1</title>
  <style>
    body {
      background-color: rgb(213, 207, 246);
      font-family: Arial, sans-serif;
      margin: 20px;
    }

    h2 {
      text-align: center;
    }

    form {
      max-width: 500px;
      margin: 0 auto;
    }

    label {
      display: block;
      margin-top: 10px;
      font-weight: bold;
    }

    input[type="text"],
    input[type="email"],
    input[type="password"],
    input[type="number"],
    textarea,
    select {
      width: 100%;
      padding: 8px;
      border: 1px solid #ccc;
      border-radius: 4px;
      box-sizing: border-box;
      margin-top: 5px;
    }

    input[type="checkbox"],
    input[type="radio"] {
      margin-top: 5px;
    }

    input[type="submit"] {
      background-color: #4CAF50;
      color: white;
      padding: 10px 20px;
      border: none;
      border-radius: 4px;
      cursor: pointer;
      margin-top: 10px;
    }
  }
</style>
</head>
<body>
  <h2>Week 1</h2>
  <form>
    <label>Name</label>
    <input type="text">
    <label>Email</label>
    <input type="email">
    <label>Password</label>
    <input type="password">
    <label>Number</label>
    <input type="number">
    <label>Text Area</label>
    <textarea>
    <label>Select</label>
    <select>
      <option>Option 1</option>
      <option>Option 2</option>
      <option>Option 3</option>
    </select>
    <label>Checkboxes</label>
    <input type="checkbox">
    <input type="checkbox">
    <label>Radio</label>
    <input type="radio">
    <input type="radio">
    <input type="submit" value="Submit">
  </form>
</body>
</html>
```

```

    input[type="submit"]:hover {
      background-color: #45a049;
    }

  </style>
</head>
<body>
  <h3>WEEK 1 - 20BCE0432</h3>

  <form>
    <label for="text">Name:</label>
    <input type="text" id="text" name="text" required>

    <label for="email">Email :</label>
    <input type="email" id="email" name="email" required>

    <label for="password">Password :</label>
    <input type="password" id="password" name="password" required>

    <label for="number">Number :</label>
    <input type="number" id="number" name="number" required>

    <label for="checkbox">Checkbox:</label>

    <input type="checkbox" id="checkbox" name="checkbox">
    <input type="checkbox" id="checkbox" name="checkbox">

    <label for="radio">Radio Buttons:</label>
    <label for="radio1">Option 1</label>
    <input type="radio" id="radio1" name="radio" value="option1" checked>
    <label for="radio1">Option 2</label>
    <input type="radio" id="radio2" name="radio" value="option2">

    <label for="date">Date Input:</label>
    <input type="date" id="date" name="date" required>

    <label for="color">Color Input:</label>
    <input type="color" id="color" name="color" required>

    <label for="file">File Input:</label>
    <input type="file" id="file" name="file" accept=".jpg, .png">

    <label for="range">Range Input:</label>
    <input type="range" id="range" name="range" min="1" max="100" step="1" value="50">

    <label for="textarea">Textarea:</label>
    <textarea id="textarea" name="textarea" rows="4" required></textarea>

    <label for="select">Select Dropdown:</label>
    <select id="select" name="select" required>
      <option value="">Select</option>
      <option value="option1">Option 1</option>
      <option value="option2">Option 2</option>

```

```

        <option value="option3">Option 3</option>
    </select>

    <input type="submit" value="Submit">
</form>
</body>
</html>

```

## OUTPUT:

The screenshot shows a web browser window displaying the output of the provided HTML code. The page has a light purple background and contains a form with the following elements:

- WEEK 1 - 20BCE0432**: A heading at the top left.
- Name:** A text input field.
- Email :** A text input field.
- Password :** A password input field.
- Number :** A text input field.
- Checkbox:** Two unchecked checkboxes.
- Radio Buttons:** Two radio buttons, with "Option 1" selected.
- Date Input:** A date input field showing "dd-mm-yyyy".
- Color Input:** A color input field showing a black color swatch.
- File Input:** A file input field with a "Choose File" button and the text "No file chosen".
- Range Input:** A range input field with a slider.
- Textarea:** A text area input field.
- Select Dropdown:** A dropdown menu with the text "Select" and a downward arrow.
- Submit:** A green button labeled "Submit".

The browser window shows the file path "C:/Users/viswa/Documents/HTML/week1.html" and the page title "WEEK 1 - 20BCE0432". The taskbar at the bottom shows the system clock as 12:09 on 28-05-2023.