Experiment 04 HTML Forms

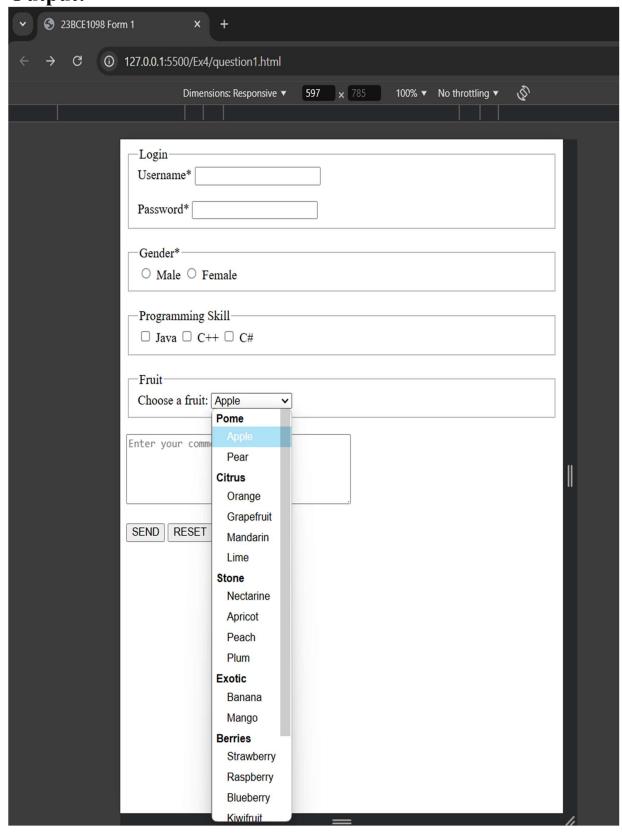
Question 01

Code:

```
<!DOCTYPE html>
<html lang="en">
<head>
 <meta charset="UTF-8">
 <meta name="viewport" content="width=device-width, initial-scale=1.0">
 <title>23BCE1098 Form 1</title>
</head>
<body>
 <form>
  <fieldset width="400px">
   <legend>Login</legend>
   <label for="username">Username*</label>
   <input type="text" id="username" name="username"><br><br>
   <label for="password">Password*</label>
   <input type="password" id="password" name="password">
  </fieldset>
  <br>
  <fieldset>
   <legend>Gender*</legend>
   <input type="radio" id="male" name="gender" value="male">
   <label for="male">Male</label>
   <input type="radio" id="female" name="gender" value="female">
   <label for="female">Female</label>
  </fieldset>
  <br>
  <fieldset>
   <le>egend>Programming Skill</legend>
   <input type="checkbox" id="java" name="skill" value="java">
   <label for="java">Java</label>
   <input type="checkbox" id="cpp" name="skill" value="cpp">
   <label for="cpp">C++</label>
   <input type="checkbox" id="csharp" name="skill" value="csharp">
   <label for="csharp">C#</label>
  </fieldset>
  <br>
  <fieldset>
```

```
<le>elegend>Fruit</legend>
   <label for="fruit">Choose a fruit:</label>
   <select id="fruit" name="fruit">
    <optgroup label="Pome">
     <option value="apple">Apple</option>
     <option value="pear">Pear</option>
    </optgroup>
    <optgroup label="Citrus">
     <option value="orange">Orange</option>
     <option value="grapefruit">Grapefruit</option>
     <option value="mandarin">Mandarin
     <option value="lime">Lime</option>
    </optgroup>
    <optgroup label="Stone">
     <option value="nectarine">Nectarine</option>
     <option value="apricot">Apricot</option>
     <option value="peach">Peach</option>
     <option value="plum">Plum</option>
    </optgroup>
    <optgroup label="Exotic">
     <option value="banana">Banana
     <option value="mango">Mango</option>
    </optgroup>
    <optgroup label="Berries">
     <option value="strawberry">Strawberry</option>
     <option value="raspberry">Raspberry</option>
     <option value="blueberry">Blueberry</option>
     <option value="kiwifruit">Kiwifruit
     <option value="passionfruit">Passionfruit
    </optgroup>
    <optgroup label="Melons">
     <option value="watermelon">Watermelon</option>
     <option value="rockmelon">Rockmelon</option>
     <option value="honeydew">Honeydew</option>
    </optgroup>
   </select>
  </fieldset>
  <br>
  <textarea name="comments" rows="5" cols="40" placeholder="Enter your comment
here"></textarea>
  <hr><hr><hr>
  <button type="submit">SEND</button>
  <button type="reset">RESET</button>
 </form>
</body>
</html>
```

Output:



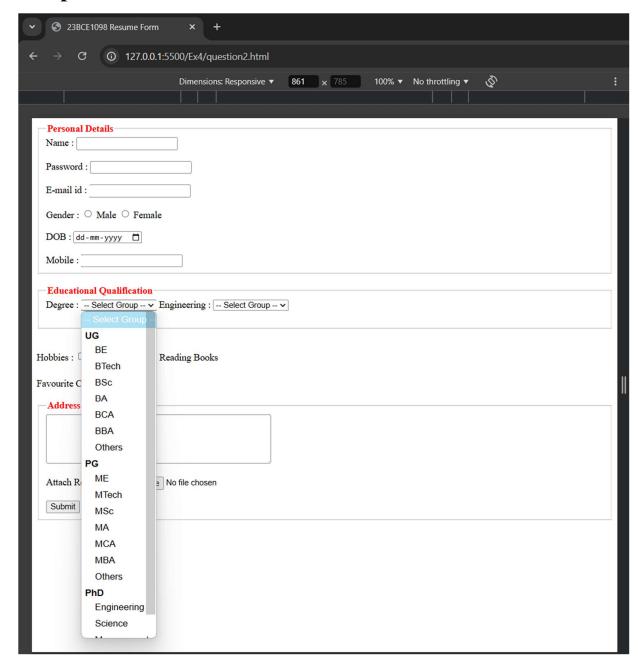
Question 02

Code:

```
<!DOCTYPE html>
<html>
<head>
  <title>Resume Form</title>
</head>
<body>
  <form>
    <fieldset>
       <le>elegend><font color="red"><b>Personal Details</b></font></legend>
       <label for="name">Name</label> :
       <input type="text" id="name" name="name"><br><br>
       <label for="password">Password</label> :
       <input type="password" id="password" name="password"><br><br>
       <label for="email">E-mail id</label> :
       <input type="email" id="email" name="email"><br><br>
       <label for="gender">Gender</label> :
       <input type="radio" id="male" name="gender" value="male">
       <label for="male">Male</label>
       <input type="radio" id="female" name="gender" value="female">
       <label for="female">Female</label><br><br><br></ri>
       <label for="dob">DOB</label> :
       <input type="date" id="dob" name="dob"><br><br>
       <label for="mobile">Mobile</label> :
       <input type="tel" id="mobile" name="mobile">
    </fieldset>
    <br>
    <fieldset>
       <legend><font color="red"><b>Educational Qualification</b></font></legend>
       <label for="degree">Degree</label> :
       <select id="degree" name="degree">
        <option value="">-- Select Group --</option>
         <optgroup label="UG">
           <option value="be">BE</option>
           <option value="btech">BTech</option>
           <option value="bsc">BSc</option>
           <option value="ba">BA</option>
           <option value="bca">BCA</option>
           <option value="bba">BBA</option>
           <option value="others">Others</option>
         </optgroup>
         <optgroup label="PG">
           <option value="me">ME</option>
```

```
<option value="mtech">MTech</option>
           <option value="msc">MSc</option>
           <option value="ma">MA</option>
           <option value="mca">MCA</option>
           <option value="mba">MBA</option>
           <option value="others">Others</option>
         </optgroup>
         <optgroup label="PhD">
           <option value="engineering">Engineering</option>
           <option value="science">Science</option>
           <option value="management">Management
           <option value="others">Others</option>
         </optgroup>
       </select>
       <label for="engineering">Engineering</label> :
       <select id="engineering" name="engineering">
         <option value="">-- Select Group --</option>
         <option value="cse">CSE</option>
         <option value="ece">ECE</option>
         <option value="eee">EEE</option>
         <option value="civil">CIVIL</option>
         <option value="mech">MECH</option>
       </select><br>>
     </fieldset>
     <br>><br>>
     <label for="hobbies">Hobbies</label> :
     <input type="checkbox" id="chess" name="hobbies" value="playing chess">
     <label for="chess">Playing chess</label>
     <input type="checkbox" id="reading" name="hobbies" value="reading books">
     <label for="reading">Reading Books</label><br><br>
     <label for="color">Favourite Color</label> :
     <input type="color" id="color" name="color">
     <br>><br>>
    <fieldset>
       <le>elegend><font color="red"><b>Address</b></font></legend>
       <textarea id="address" name="address" rows="5" cols="50"></textarea><br><br><br>
       <label for="resume">Attach Resume</label> :
       <input type="file" id="resume" name="resume" ><br><br>
       <button type="submit">Submit</button>
    </fieldset>
  </form>
</body>
</html>
```

Output:



Question 03

Code:

```
<!DOCTYPE html>
<html lang="en">
<head>
 <meta charset="UTF-8">
 <meta name="viewport" content="width=device-width, initial-scale=1.0">
 <title>Product Feedback</title>
</head>
<body>
 <form oninput="total.value = parseInt(slider1.value) + parseInt(slider2.value) +
parseInt(slider3.value)">
  <hr>
  <label for="slider1">Quality:</label>&emsp;
  <output for="slider1" name="output1"></output><br><br>
        0
   <input
    type="range"
    id="slider1" name="slider1"
    min="0" max="10"
    oninput="output1.value = parseInt(slider1.value)"
   > 10
  <hr>
  <label for="slider2">Usability:</label>&emsp;
  <output for="slider2" name="output2"></output><br>>br>
  >
        0
   <input
    type="range"
    id="slider2" name="slider2"
    min="0" max="10"
    oninput="output2.value = parseInt(slider2.value)"
   > 10
  <hr>
  <label for="slider3">Design:</label>&emsp;
  <output for="slider3" name="output3"></output><br><br>
  >
        0
```

```
<input
type="range"
id="slider3" name="slider3"
min="0" max="10"
oninput="output3.value = parseInt(slider3.value)"
> 10

<hr>
<hr>
<label for="total">Total Score:</label>
<output id="total" name="total"></output>
<br>
<br/>
</form>
</body>
</html>
```

Output:

