```
HTML V
                               RUN >
           NEW
    <!DOCTYPE html>
 2 - <html>
 3 · <head>
 4
      <title>Aadhaar Card Application</title>
 5 -
      <style>
 6 -
        body {
 7
           font-family: Arial, sans-serif;
 8
          margin: 40px;
 9
          background-color: #f5f5f5;
10
11 -
        .container,
                     .success-box {
12
          background-color: white;
13
           padding: 30px;
          border-radius:
14
                           10px;
15
          max-width: 600px;
16
          margin: auto;
          box-shadow: 0 0 10px rgba(0, 0, 0, 0.1);
17
18
19 -
        h2, h1 {
20
           text-align: center;
21
        label {
22 -
23
           font-weight: bold;
24
25 -
        input, select {
26
          width: 100%;
27
          padding: 8px;
          margin: 10px 0 20px;
28
29
          border: 1px solid #ccc;
30
          border-radius: 4px;
31
32 -
        input[type="submit"]
          background-color: #4CAF50;
33
           color: white;
34
35
          border: none;
36
          cursor: pointer;
37
38 -
        input[type="submit"]:hover
39
          background-color: #45a049;
40
41 -
        .photo-preview {
          margin-top: 10px;
42
           width: 150px;
43
          height: 180px;
44
          object-fit: cover;
45
          border: 1px solid #ccc;
46
47
48 -
        .success-box {
49
           display: none;
          background-color: #e0ffe0;
50
51
52 -
        .success-box p {
53
          font-size: 18px;
           text-align: center;
54
55
56
      </style>
    </head>
57
58 - <body>
59
60
      <!-- Form Section -->
      <div class="container" id="form-section">
61 -
62
        <h2>Aadhaar Card Application Form</h2>
63 •
        <form id="aadhaarForm" onsubmit="return handleSubmit(event</pre>
           <label for="fullname">Full Name:</label>
64
           <input type="text" id="fullname" name="fullname" require</pre>
65
66
           <label for="dob">Date of Birth:</label>
67
           <input type="date" id="dob" name="dob" required>
68
69
          <label for="gender">Gender:</label>
70
           <select id="gender" name="gender" required>
71 -
             <option value="">Select</option>
72
             <option value="Male">Male</option>
73
             <option value="Female">Female</option>
74
75
             <option value="Other">Other</option>
```

```
51
52 -
         .success-box p {
53
           font-size: 18px;
54
           text-align: center;
55
       </style>
56
    </head>
57
58 - <body>
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       <!-- Form Section -->
       <div class="container" id="form-section">
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         <h2>Aadhaar Card Application Form</h2>
63 -
         <form id="aadhaarForm" onsubmit="return handleSubmit(</pre>
64
           <label for="fullname">Full Name:</label>
           <input type="text" id="fullname" name="fullname" re</pre>
65
66
67
           <label for="dob">Date of Birth:</label>
68
           <input type="date" id="dob" name="dob" required>
69
70
           <label for="gender">Gender:</label>
           <select id="gender" name="gender" required>
71 -
72
             <option value="">Select</option>
             <option value="Male">Male</option>
73
74
             <option value="Female">Female</option>
75
             <option value="Other">Other</option>
76
           </select>
77
           <label for="address">Address:</label>
78
79
           <input type="text" id="address" name="address" requ</pre>
80
           <label for="mobile">Mobile Number:</label>
81
           <input type="tel" id="mobile" name="mobile" pattern</pre>
82
83
           <label for="email">Email ID:</label>
84
           <input type="email" id="email" name="email" require</pre>
85
86
87
           <label for="photo">Upload Photo:</label>
           <input type="file" id="photo" name="photo" accept="</pre>
88
           <img id="preview" class="photo-preview" src="#" alt</pre>
89
90
91
           <input type="submit" value="Submit Application">
         </form>
92
93
       </div>
94
95
       <!-- Success Message Section -->
       <div class="success-box" id="success-section">
96 -
         <h1>V Application Submitted Successfully!</h1>
97
98
         Your Aadhaar Card form has been submitted.
99
         Thank you for registering.
100
       </div>
101
102 -
       <script>
103 -
         function previewPhoto() {
           const file = document.getElementById("photo").files
104
105
           const preview = document.getElementById("preview");
106
107 -
           if (file) {
108
             const reader = new FileReader();
             reader.onload = function(e) {
109 +
110
               preview.src = e.target.result;
111
               preview.style.display = "block";
112
113
             reader.readAsDataURL(file);
114
           }
115
```

Aadhaar Card Application Form

Full Name:

M.Nandhini

Date of Birth:

08/24/2005

Gender:

Female

Address:

No 12 .periyar nahar .chennai 21

Mobile Number:

8123456789

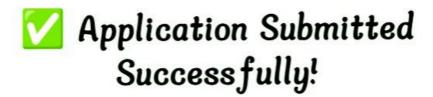
Email ID:

itsmenandhu08@gmail.com

Upload Photo:

Choose File | 1000096501.jpg





Your Aadhaar Card form has been submitted.

Thank you for registering.