



Name	Id
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Section : C

Date : 25 September 2024

[For Teachers use only: Don't Write Anything inside this box]

<div><u>Status</u></div> <div>Marks: .....</div> <div>Signature:.....</div> <div>Comments:.....</div> <div>Date:.....</div>
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## Log In

```
<!DOCTYPE html>
<html lang="en">

<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width,
initial-scale=1.0">
  <title>Marshmellow</title>
  <style>
    body {
      display: flex;
      justify-content: center;
      align-items: center;
      height: 100vh;
      background-color: #f4f1de;
      font-family: 'Arial', sans-serif;
    }

    #diva {
      border-radius: 10px;
      box-shadow: 0px 8px 16px rgba(0, 0, 0, 0.2);
      width: 320px;
      padding: 30px;
    }

    form {
      display: flex;
      flex-direction: column;
      gap: 15px;
    }
```

```
input[type="text"],
input[type="password"] {
    width: 100%;
    padding: 10px;
    border-radius: 5px;
    border: 1px solid #ddd;
    box-sizing: border-box;
}

button {
    background-color: #81b29a;
    color: white;
    padding: 10px;
    border: none;
    border-radius: 5px;
    cursor: pointer;
    font-size: 14px;
}

button:hover {
    background-color: #3d5a80;
}

.btn-links {
    display: flex;
    justify-content: space-between;
    margin-top: 10px;
}

.btn-links a {
    font-size: 12px;
    color: #ffffff;
```

```
    text-decoration: none;
}

label {
    font-size: 14px;
    color: #000000;
}

span,
a {
    font-size: 12px;
    color: #000000;
}

input[type="checkbox"] {
    margin-right: 5px;
}

.submit-btn {
    width: 100%;
    background-color: #3d5a80;
    padding: 12px;
    color: white;
    border: none;
    border-radius: 5px;
    cursor: pointer;
    font-size: 16px;
}

.submit-btn:hover {
    background-color: #1c3144;
}
```

```
</style>
</head>

<body>
  <div id="diva">
    <form action="login.php" method="post">
      <label for="username">Username</label>
      <input type="text" id="username" placeholder="Enter your
name" minlength="3" maxlength="10" required>

      <label for="password">Password</label>
      <input type="password" id="password" placeholder="Enter your
password" minlength="3" maxlength="10" required>

      <div class="btn-links">
        <button><a href="#">Forgot Password?</a></button>
        <button><a href="form.php">New Here? Sign
Up</a></button>
      </div>

      <label>
        <input type="checkbox" required> I agree with
        <a href="#">Terms and Conditions</a>
      </label>

      <button type="submit" class="submit-btn">Login</button>
    </form>
  </div>
</body>
</html>
```

## Output:

Username

Nishi21

Password

.....

Forgot Password? New Here? Sign Up

☒ I agree with [Terms and Conditions](#)

Login

## Registration:

```
<!DOCTYPE html>
<html lang="en">

<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width,
initial-scale=1.0">
  <title>Form Styling</title>
```

```
<style>
  body {
    display: flex;
    justify-content: center;
    align-items: center;
    height: 100vh;
    background-color: #f4f1de;
    font-family: 'Arial', sans-serif;
  }

  form {
    background-color: #f4f1de;
    padding: 30px;
    border-radius: 10px;
    box-shadow: 0px 8px 16px rgba(0, 0, 0, 0.2);
    width: 350px;
  }

  label {
    color: rgb(0, 0, 0);
  }

  input, select, textarea {
    width: 100%;
    padding: 8px;
    margin: 10px 0;
    border-radius: 5px;
    border: 1px solid #fff;
    background-color: #f0efeb;
    color: #333;
  }
```

```
input[type="radio"],
input[type="checkbox"] {
    width: auto;
    margin-right: 5px;
}

button, input[type="submit"], input[type="reset"] {
    background-color: #3d405b;
    color: #fff;
    border: none;
    padding: 10px;
    width: 100%;
    border-radius: 5px;
    cursor: pointer;
}

button:hover,
input[type="submit"]:hover,
input[type="reset"]:hover {
    background-color: #81b29a;
}

span, a {
    color: black;
    text-decoration: none;
}

a:hover {
    text-decoration: underline;
}

</style>
```



```
</head>

<body>
  <form action="form.php" method="post">
    <label for="username">Username</label>
    <input type="text" id="username" placeholder="Enter your name"
minlength="3" maxlength="10" required>

    <label for="password">Password</label>
    <input type="password" id="password" placeholder="Password"
minlength="3" maxlength="10" required>

    <label for="email">Email</label>
    <input type="email" id="email"
placeholder="example@gmail.com" required>

    <label for="phone">Phone</label>
    <input type="tel" id="phone" placeholder="+880-1XXXXXXXXXX"
required>

    <label for="gender">Gender</label><br>
    <input type="radio" name="Gender" id="male" value="male">
    <label for="male">Male</label>
    <input type="radio" name="Gender" id="female" value="female">
    <label for="female">Female</label>
    <br><br>

    <label for="life-status">Life Status</label>
    <select id="life-status" required>
      <option value="married">Married</option>
      <option value="single">Single</option>
      <option value="divorced">Divorced</option>
```

```
</select>

<label for="dob">Date of Birth</label>
<input type="date" id="dob" required>

<label for="cv">Enter your CV</label>
<input type="file" id="cv" required>

<label for="comments">Additional Comments</label>
<textarea rows="3" cols="30" id="comments" placeholder="Enter
your comments here"></textarea>

<br>
<input type="checkbox" required> I agree with
<a href="#">terms and conditions</a>

<br><br>
<input type="reset" value="Reset">
<input type="submit" value="Submit">
</form>
</body>

</html>
```

## Output:

Username

Nishi21

Password

.....

Email

nishi@gmail.com

Phone

01672653446

Gender

☐ Male ☒ Female

Life Status

Married

Date of Birth

10/17/2001

Enter your CV

Choose File

No file chosen

Additional Comments

Assalamualaikum ! I am Fatema Akter Nishi.

☒ I agree with terms and conditions

Reset

Submit