CS255

Assignment-3

NAME :Pothula Aparna

ROLL.NO :B22CS009

1. Creating a Student Registration HTML form. The details asked should be:

First-Name, Last-Name, Email ID, Mobile Number, Address, Hobbies, Course, Gender,

Date-of-Birth, etc.

CODE :

```
<!DOCTYPE html>
<html>
 <style>
 label{
 margin-right:150px;
 }
 table{
 background:linear-gradient(to bottom,#33ccff 0%,#ff99cc 100%);
 border: 4px solid #000000;
 border-style:dashed;
 }
 div{
 background-color:aliceblue;
 }
 </style>
 <head>
 <title>
 Assignment- 3
 </title>
```

```html
</head>
<body>
<form>
<fieldset border-style="solid dotted">
<table>
<tr>
<td><label for="fname">First name:</label></td>
<td><input placeholder="Enter your name" type="text" id="fname" maxlength="50"
name="first name">
(max 50 characters allowed)</td>
</tr>
<tr>
<td><label for="lname">Last Name:</label></td>
<td><input placeholder="enter your last name" maxlength="50" type="text" id="lname"
name="last name">
(max 50 characters allowed)</td>
</tr>
<tr>
<td><label for="email">Email Id:</label></td>
<td><input placeholder="enter your email id" type="text" id="email" name="email"></td>
</tr>
<tr>
<td><label for="number">Mobile Number:</label></td>
<td><input placeholder="enter your mobile number "type="text" maxlength="10"
id="number" name="number"></td>
</tr>
<tr>
<td><label for="gender">Gender:</label></td>
<td><input type="radio" id="gender">male
<input type="radio" id="gender">female</td>
</tr>
```

```
<tr>

<td><label for="DOB">Date of Birth:</label></td>

<td><select name="day">

<option>Day</option>

<option>1</option>

<option>2</option>

<option>3</option>

<option>4</option>

</select>

<select name="month">

<option>Month</option>

<option>January</option>

<option>February</option>

<option>March</option>

</select>

<select name="year">

<option>Year</option>

<option>2000</option>

<option>2001</option>

<option>2002</option>

<option>2003</option>

<option>2004</option>

</select></td>

</tr>

<tr>

<td><label>Adress</label></td>

<td><textarea name="Adress" id="Adress" cols="50" rows="10"></textarea></td>

</tr>

<tr>

<td><label for="city">City:</label></td>

<td><input type="text" id="city" name="City"></td>
```
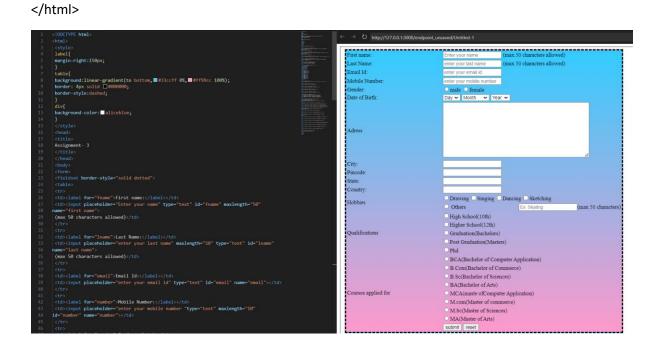
```html
</tr>
<tr>
<td><label for="pincode">Pincode:</label></td>
<td><input type="text" id="pincode" name="Pincode"></td>
</tr>
<tr>
<td><label for="state">State:</label></td>
<td><input type="text" id="state" name="State"></td>
</tr>
<tr>
<td><label for="country">Country:</label></td>
<td><input type="text" id="country" name="Country"></td>
</tr>
<tr>
<td rowspan="2"><label>Hobbies</label>
<td><input type="checkbox" name="1" value="drawing">Drawing
<input type="checkbox" name="2" value="singing">Singing
<input type="checkbox" name="3" value="dancing">Dancing
<input type="checkbox" name="4" value="sketching">Sketching</td>
</tr>
<tr>
<td><input type="checkbox" name="5" value="others:">
<label for="others">Others</label>
<input placeholder="Ex: Skating" maxlength="50" type="text" id="others"
name="Others">(max 50 characters)</td>
</tr>
<tr>
<td rowspan="6"><label for="qualification">Qualifications</label></td>
<tr>
<td><input type="checkbox" name="6" value="highschool">High School(10th)</td>
<tr>
```

```html
<td><input type="checkbox" name="7" value="higherschool">Higher School(12th)</td>
<tr>
<td><input type="checkbox" name="8" value="graduation">Graduation(Bachelors)</td>
<tr>
<td><input type="checkbox" name="9" value="postgraduation">Post
Graduation(Masters)</td>
<tr>
<td><input type="checkbox" name="10" value="phd">Phd</td>
</tr>
<tr>
<td rowspan="10"><label for="course">Courses applied for</label></td>
</tr>
<tr>
<td><input type="radio" name="c1" value="Bbc">BCA(Bachelor of Computer
Application)</td>
</tr>
<tr>
<td><input type="radio" name="c1" value="bcom">B.Com(Bachelor of Commerce)</td>
</tr>
<tr>
<td><input type="radio" name="c1" value="bsc">B.Sc(Bachelor of Sciences)</td>
</tr>
<tr>
<td><input type="radio" name="c1" value="ba">BA(Bachelor of Arts)</td>
</tr>
<tr>
<td><input type="radio" name="c1" value="mca">MCA(maste ofComputer Application)</td>
</tr>
<tr>
<td><input type="radio" name="c1" value="mcom">M.com(Master of commerce)</td>
</tr>
```

```html
<tr>

<td><input type="radio" name="c1" value="msc">M.Sc(Master of Sciences)</td>

</tr>

<tr>

<td><input type="radio" name="c1" value="ma">MA(Master of Arts)</td>

</tr>

<tr>

<td><input type="submit" value="submit">

<input type="reset" value="reset"></td>

</tr>

</table>

</form>

</body>

</html>
```

First name:	[Enter your name] (max 50 characters allowed)
Last Name:	[enter your last name] (max 50 characters allowed)
Email Id:	[enter your email id]
Mobile Number:	[enter your mobile number]
Gender:	○ male ○ female
Date of Birth:	[Day ▾] [Month ▾] [Year ▾]
Adress	[ ]
City:	[ ]
Pincode:	[ ]
State:	[ ]
Country:	[ ]
Hobbies	☐ Drawing ☐ Singing ☐ Dancing ☐ Sketching ☐ Others [Ex: Skating] (max 50 characters)
Qualifications	☐ High School(10th) ☐ Higher School(12th) ☐ Graduation(Bachelors) ☐ Post Graduation(Masters) ☐ Phd
Courses applied for	○ BCA(Bachelor of Computer Application) ○ B.Com(Bachelor of Commerce) ○ B.Sc(Bachelor of Sciences) ○ BA(Bachelor of Arts) ○ MCA(maste ofComputer Application) ○ M.com(Master of commerce) ○ M.Sc(Master of Sciences) ○ MA(Master of Arts)

[submit] [reset]