

CA-213

ASSIGNMENT-3



Q1.

Sol. <!DOCTYPE html>

<html>

<head>

    <title>Keyboard Maestro Custom HTML prompt--Example by JMichealTX</title>

</head>

<body>

<table border="1" align="center" bgcolor="orange">

    <form>

        <tr>

        -   <td colspan="2"><h2 align="center"><b>KM Custome HTML From Example Using AppleScript</b></h2>

                            <p align="center"><font size="5">(by JMichealTX)</font></p>

            </td>

        </tr>

        <tr>

            <td><b>Name:</b></td>

            <td><input type="text" name="entername" placeholder="Jhon AppleScript" required></td>

        </tr>

        <tr>

            <td><b>Email:</b></td>

            <td><input type="Email" name="enteremail" placeholder="johnny@AppleScript.com" required></td>

        </tr>

        <tr>

            <td><b>Password:</b></td>

            <td><input type="password" name="enterpass" placeholder="\*\*\*\*\*\*" required></td>

        </tr>

        <tr>

            <td><b>Approval Required:</b></td>

            <td>

                <input type="checkbox" name="checkbox" id="Do You Approve?" required>

                <label for="Do You Approve?">

                    Do You Approve?

                </label>

            </td>

        </tr>

        <tr>

            <td><b>Pick Your Favourite:</b></td>

            <td>

                <input type="radio" name="radio" id="choiceA">

                    <label for="choiceA">Choice A</label><br>

                <input type="radio" name="radio" id="choiceB">

                    <label for="choiceB">Choice B</label><br>

                <input type="radio" name="radio" id="choiceC">

                    <label for="choiceC">Choice C</label><br>

            </td>

        </tr>

        <tr>

            <td><b>Popular Menu:</b></td>

            <td>

                <select multiple="" size="1" required>

                    <option>Texas--TX</option>

                    <option>Jexas--JX</option>

                    <option>Hexas--HX</option>

                    <option>Pexas--PX</option>

                <select>

            </td>

        </tr>

        <tr>

            <td><b>List</b></td>

            <td>

                <select size="5" multiple required>

                    <option>Califronia--CA</option>

                    <option>Colorado--CO</option>

                    <option>Connecticut--CN</option>

                    <option>Dalifornia--DA</option>

                    <option>Dolorado--DO</option>

                    <option>Soluattua--SL</option>

                    <option>Ddhdjnk--DH</option>

                    <option>Sbjaghanm-SJ</option>

                </select>

            </td>

        </tr>

        <tr>

            <td><b>Field Ignored by KM</b></td>

            <td><input type="number" name="enterKM" placeholder="10,384"></td>

        </tr>

        <tr>

            <td><b>Text Area</b></td>

            <td><textarea placeholder="Now is the time for all good men to come to the aid of their country" cols="50" rows="3"></textarea></td>

        </tr>

        <tr>

            <td colspan="2">

                <input type="submit" name="submit" value="Save">

                <input type="button" name="cancel" value="Cancel">

                <input type="reset" name="reset" value="Resize">

            </td>

        </tr>

    </form>

</table>

</body>

</html>

Q2.

Sol. <!DOCTYPE html>

<html>

<head>

    <title>A Samlple Form</title>

</head>

<body>

<form>

    <fieldset>

        <legend>Customer Info</legend>

        <label>Name: </label><input type="text" name="entername" placeholder="Enter Your Name"><br><br>

        <label>Telephone: </label><input type="number" name="telephone" placeholder="Pattern 1-234-567-8910"><br><br>

        <label>Email adress: </label><input type="email" name="enteremail" placeholder="Enter Your Email Address"><br><br>

    </fieldset>

    <fieldset>

        <legend>Books</legend>

        <input type="text" name="bookname">

        <label>

            Quantity(Maximum5):

        </label>

        <input type="number" name="quantity" max="5" min="1">

    </fieldset><br>

    <input type="submit" name="submit"><br><br>

</form>

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</body>

</html>

Q3.

Sol. <!DOCTYPE html>

<html>

<head>

    <title>My Site</title>

</head>

<body>

<form action="home.html">

<table align="center">

        <tr>

            <td rowspan="2">

                <img src="https://tse3.mm.bing.net/th?id=OIP.vnn6mwgbA2\_BLFTZxOMgHQHaDl&pid=Api&P=0&w=334&h=162" height="150%">

            </td>

            <td><h2><b>Enter Your User id: </b></h2><input type="text" name="userid" required></td>

        </tr>

        <tr>

            <td><h2><b>Enter Your Passsword: </b></h2><input type="passsword" name="pass" required></td>

        </tr>

        <tr>

            <td colspan="2" align="center">

                <input type="submit" name="submit" value="Login"> <input type="button" name="cancel" value="Logout">

            </td>

        </tr>

        <tr>

            <td colspan="2" align="center">

                <h3><a href="forgot\_pass.html"><font color="red">Forgot Password??</font></a></h3>

                <h3><a href="create\_acc.html"><font color="green">Dont have Account? Create Account</font></a></h3>

            </td>

        </tr>

</table>

</form>

</body>

</html>

Forgot password page:-

<!DOCTYPE html>

<html>

<head>

    <title>Forgot Password</title>

</head>

<body>

<fieldset>

    <legend>Varify Your Self</legend>

<form action="question3.html">

    <table align="center">

            <tr>

                <td>Enter Your Email:</td>

                <td><input type="email" name="enteremail" required></td>

            </tr>

            <tr>

                <td colspan="2">A verification Code is Sent to Email given By You: </td>

            </tr>

            <tr>

                <td>Enter The Varification code:</td>

                <td><input type="number" name="entercode" max="9999" min="1000" required></td>

            </tr>

            <tr>

                <td>Enter New Password:</td>

                <td><input type="Password" name="enterpass" required></td>

            </tr>

            <tr>

                <td>RE-enter New Password:</td>

                <td><input type="Password" name="reenterpass" required></td>

            </tr>

            <tr>

                <td colspan="2">

                    <input type="submit" name="submit">

                    <input type="reset" name="reset" value="cancel">

                </td>

            </tr>

    </table>

</form>

</fieldset>

</body>

</html>

Create new account page:-

<!DOCTYPE html>

<html>

<head>

    <title>Create Your Account</title>

</head>

<body>

<form action="question3.html">

    <fieldset>

        <legend>Enter Your Details</legend>

        <table align="center">

            <tr>

                <td rowspan="12">

                    <img src="https://tse4.mm.bing.net/th?id=OIP.3bpYJ2jfDPdnuUlLd\_WulgHaGG&pid=Api&P=0&w=204&h=169" align="left">

                </td>

            </tr>

            <tr>

                <td>Enter User Name: </td>

                <td><input type="text" name="entername" required placeholder="Enter Name"></td>

            </tr>

            <tr>

                <td>Enter Your Password: </td>

                <td><input type="password" name="enterpass" required placeholder="Enter Password"></td>

            </tr>

            <tr>

                <td>RE-Enter Your Password: </td>

                <td><input type="password" name="enterpass" required placeholder="RE-Enter Password"></td>

            </tr>

            <tr>

                <td>Enter Your Email Address: </td>

                <td><input type="email" name="enteremail" required placeholder="Enter Your Email Address"></td>

            </tr>

            <tr>

                <td>Enter Your Phone/Mobile Number: </td>

                <td><input type="text" name="enternumber" placeholder="Enter Your Mobile number"></td>

            </tr>

            <tr>

                <td>Enter Your Age: </td>

                <td><input type="number" name="enterage" required placeholder="Enter Your Age"></td>

            </tr>

            <tr>

                <td>Enter Your City: </td>

                <td><input type="text" name="entercity" required placeholder="Enter Your City"></td>

            </tr>

            <tr>

                <td>Select Your gender: </td>

                <td>

                    <input type="radio" name="entergender" id="male" required><label for="male">Male</label>

                    <br>

                    <input type="radio" name="entergender" id="female" required><label for="female">FeMale</label>

                </td>

            </tr>

            <tr>

                <td>Enter Your Date of Birth: </td>

                <td><input type="date" name="enterdob" required max="2020-07-31"></td>

            </tr>

            <tr>

                <td>Enter Your bibliography: </td>

                <td><textarea cols="30" rows="5"></textarea></td>

            </tr>

            <tr>

                <td colspan="2" align="center">

                    <input type="submit" name="submit" value="Create Account">

                    <input type="reset" name="reset" value="reset">

                </td>

            </tr>

        </table>

    </fieldset>

</form>

</body>

</html>