

Practical No. 6B – T2

To design and develop web pages using HTML form and input elements

PRN: 2018BTECS00025

Problem Statement 1: Design a HTML form for the MH-CET registration 2021. Access it locally and in LAN using a web server.

Github code Link:

https://github.com/revati9834/PL3/blob/master/2018BTECS00025_practical_6B.html

Webpage screenshots:

MH-CET Registration 2021

Student Information

First Name: Middle Name: Last Name:

Parent's Name:

Email-ID:

ID proof:

Address:

Educational Information

Qualification:

Branch:

University:

College:

Enter exam seat Number:

Exam Preference

MH-CET Exam Paper Branch:

Parent's Name:

Email-ID:

ID proof:

Address:

This page says

Successfully Submitted

OK

Educational Information

Qualification:

Branch:

University:

College:

Enter exam seat Number:

Exam Preference

MH-CET Exam Paper Branch:

Enter centers for exam:

Submit Reset

Code:

```
<!DOCTYPE html>

<html>

<head>

    <title>MH-CET registration 2021</title>

    <style>

        fieldset {

            background-color: azure;

        }

        legend {
```

```

        background-color: crimson;

        color: white;

        padding: 5px 10px;
    }

    input {
        margin: 5px;
    }
</style>
</head>
<body>
    <form>
        <h1 align="center">MH-CET Registration 2021</h1>
        <fieldset>
            <legend>Student Information</legend>
            <table>
                <tr>
                    <td>
                        <label> First Name:</label>
                    </td>
                    <td>
                        <input type="text" name="nm" placeholder="Enter
your First name">
                    </td>
                    <td>
                        <label> Middle Name:</label>
                    </td>
                    <td>
                        <input type="text" name="nm" placeholder="Enter
your Middle name">
                    </td>

```

```

        <td>
            <label> Last Name:</label>
        </td>
        <td>
            <input type="text" name="nm" placeholder="Enter
your Last name">
        </td>
    </tr>
    <tr>
        <td>
            <label> Parent's Name:</label>
        </td>
        <td>
            <input type="text" name="nm" placeholder="Enter
your Parent's Name">
        </td>
    </tr>
    <tr>
        <td>
            <label> Email-ID:</label>
        </td>
        <td>
            <input type="text" name="nm" placeholder="Enter
your Email-ID ">
        </td>
    </tr>
    <tr>
        <td>
            <label> ID proof:</label>
        </td>
        <td>
```

```

                                <select name="id" required>
                                <option value="aadhar" selected>Aadhar
card</option>
                                <option value="pan">PanCard</option>
                                <option value="voter id">Voter ID</option>
                                <option value="Driving licence">Driving
licence</option>
                                </select>
                                </td>
                            </tr>
                            <tr>
                                <td>
                                    <label for="add">Address: </label>
                                </td>
                                <td>
                                    <textarea cols="30" rows="5" required></textarea>
                                </td>
                            </tr>
                        </table>
                    </fieldset>
                    <fieldset>
                        <legend>Educational Information:</legend>
                        <table>
                            <tr>
                                <td><label for="quali">Qualification: </label></td>
                                <td>
                                    <select name="quali" size="1" required multiple>
                                        <option value="hsc">HSC</option>
                                        <option value="Diploma">Diploma</option>
                                        <option value="btech">B.Tech</option>
                                        <option value="bsc">BSC</option>
                                    </select>
                                </td>
                            </tr>
                        </table>
                    </fieldset>
                </div>
            </div>
        </div>
    </div>

```

```

        </td>
    </tr>
    <tr>
        <td><label for="branch">Branch: </label></td>
        <td>
            <select name="branch" size="3" required>
                <option value="art">Art</option>
                <option value="sci">Science</option>
                <option value="com">Commerce</option>
            </select>
        </td>
    </tr>
    <tr>
        <td><label for="Uni">University:</label></td>
        <td>
            <input list="uni" name="uni" required />
            <datalist id="uni">
                <option value="Shivaji University"></option>
                <option value="Pune University"></option>
                <option value="Mumbai University"></option>
            </datalist>
        </td>
    </tr>
    <tr>
        <td><label for="clg">College :</label></td>
        <td>
            <input list="clg" name="clg" required />
            <datalist id="clg">
                <option value="Walchand College Of
Engineering,Sangli"></option>

```

```

<option value="College of Engineering,Pune"></option>
<option value="Veermata Jijabai Technological Institute,
Mumbai"></option>

</datalist>

</td>

</tr>

<tr>

<td><label >Enter exam seat Number: </label></td>

<td>

<input type="number" placeholder="exam seat number"
required />

</td>

</tr>

</table>

</fieldset>

<fieldset>

<legend>Exam Preference</legend>

<table>

<tr>

<td><label for="branch"> MH-CET Exam Paper Branch: </label></td>

<td>

<select name="branch" size="2" required multiple>

<option>Bachelor in Engineering/Technology (B.E/B.Tech)/
Bachelor in Pharmacy (B.Pharm/Pharm.D),
Agriculture & Allied Courses/
Fisheries Science/ Dairy
Technology

</option>

<option>
Master In Computer Applications

</option>

```

```

        <option>
            Master of Architecture
        </option>
    </select>
</td>
</tr>
<tr>
    <td><label for="City">Enter centers for exam: </label></td>
    <td>
        <select name="city" size="5" required>
            <optgroup label="Pune">
                <option value="pune">Pune</option>
                <option value="Satara">Satara</option>
                <option value="Sangli">Sangli</option>
                <option value="Kolhapur">Kolhapur</option>
            </optgroup>
            <optgroup label="Mumbai">
                <option value="Navi Mumbai">Navi Mumbai</option>
                <option value="Thane">Thane</option>
                <option value="West Mumbai ">West Mumbai </option>
                <option value=" Raigad">Raigad</option>
            </optgroup>
            <optgroup label="Nagpur">
                <option value="Wardha">Wardha</option>
                <option value="Nagpur">Nagpur </option>
                <option value="Bhandara"> Bhandara </option>
            </optgroup>
        </select>
    </td>
</tr>
</table>

```



```
</fieldset>

<table align="center" bgcolor="grey">

  <tr>

    <td>

      <button type="submit" onclick="alert('Successfully
Submitted')">Submit</button>

    </td>

    <td>

      <button type="reset" onclick="alert('Reset')">Reset</button>

    </td>

  </tr>

</table>

</form>

</body>

</html>
```