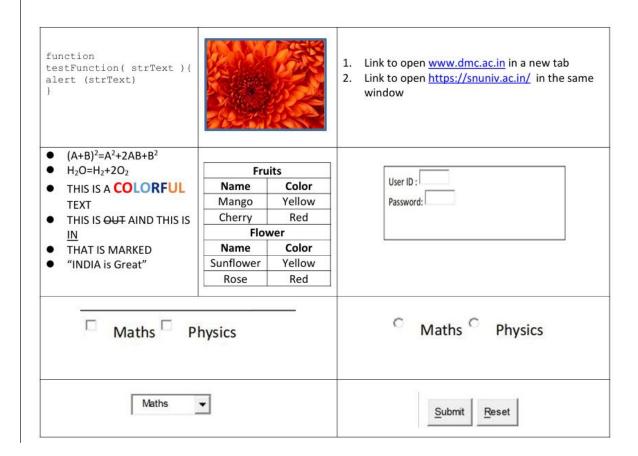
This is HTML Assignment 1



5. Create employee registration webpage using HTML form objects.

Solution:

```
File: fifth.html

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

<head>

<meta charset="UTF-8">

<meta name="viewport" content="width=device-width, initial-scale=1.0">

<title>HTML Assignment 5</title>
```

```
</head>
<body>
 function testFunction( strText ){
          alert (strText)
        }
       <div style="margin: 0 auto;">
        <img src="https://images.unsplash.com/photo-1734692817970-
0dde7ba300e4?w=600&auto=format&fit=crop&q=60&ixlib=rb-
4.0.3&ixid=M3wxMjA3fDB8MHxmZWF0dXJIZC1waG90b3MtZmVIZHw4fHx8ZW58MHx8fHx8"
          alt="A cabin" title="A cabin in the snow with the green arora light in the background"
          style="height: 150px; border: 2px solid blue; margin: 4px; display: block; margin-left:
auto; margin-right: auto;">
     </div>
     Link to open <a href="http://www.dmc.ac.in" target="_blank">www.dmc.ac.in</a> in
a new tab
        Link to open <a href="https://snuniv.ac.in/" target="_self">https://snuniv.ac.in/</a> in
the
          same window
```

```
(A+B)<sup>2</sup> = A<sup>2</sup> + 2AB + B<sup>2</sup>
  H<sub>2</sub> + 20<sub>2</sub>
  THIS IS A
    <font color="#FF2626">C</font>
    <font color="#FF9966">O</font>
    <font color="#71EFA3">L</font>
    <font color="#00C1D4">O</font>
    <font color="#0F52BA">R</font>
    <font color="#0F52BA">F</font>
    <font color="#FFD523">U</font>
    <font color="#FFD523">L</font>
    TEXT
  THIS IS <del>OUT</del> AIND THIS IS <u>IN</u>
  <mark>THAT IS MARKED</mark>
  <q>INDIA is Great</q>
 Fruits
```

```
Name
Color
Mango
Yellow
Cherry
Red
Flower
Name
Color
Sunflower
Yellow
Rose
Red
```

```
<form action="#" method="post" style="padding: 4px;">
    <label for="id">User ID:</label>
    <input type="id">
    <br>
    <br>
    <label for="id">Password:</label>
    <input type="id">
   </form>
 <input type="checkbox" id="maths" name="subject" value="Maths">
   <label for="maths"> Maths</label>
   <input type="checkbox" id="physics" name="subject" value="Physics">
   <label for="physics"> Physics</label>
 <label for="subject">Math</label>
   <input type="radio" name="subject" value="Math" required>
   <label for="subject">Physics</label>
   <input type="radio" name="subject" value="Physics" required>
 <select id="department" name="department" required>
    <option value="IT">Math</option>
    <option value="Physics">Physics
    <option value="Chemistry">Chemistry</option>
    <option value="Biology">Biology</option>
```

```
<option value="Computer Science">Computer Science</option>
       </select>
     <button>Submit</button>
       <button>Reset</button>
     <iframe src="iframe_demo.html" width="99%" height="525px" style="padding:</pre>
5px;"></iframe>
     </body>
</html>
File: iframe_demo.html
<!DOCTYPE html>
<html lang="en">
<head>
 <meta charset="UTF-8">
 <meta name="viewport" content="width=device-width, initial-scale=1.0">
 <title>Employee Registration</title>
</head>
<body>
 <h2>Employee Registration Form</h2>
 <form action="#" method="post">
```

```
<label for="empID">Employee ID:</label>
    <input type="text" placeholder="Enter your id here" id="empID" name="empID"
required><br><br>
    <label for="name">Full Name:</label>
    <input type="text" placeholder="Enter your name here" id="name" name="name"
required><br><br>
    <label for="email">Email:</label>
    <input type="email" placeholder="Enter your mail id here" id="email" name="email"
required><br><br>
    <label for="phone">Phone Number:</label>
    <input type="tel" placeholder="Enter your number here" id="phone" name="phone"</p>
required><br><br>
    <label for="department">Department:</label>
    <select id="department" name="department" required>
      <option value="IT">IT</option>
      <option value="HR">HR</option>
      <option value="Finance">Finance</option>
      <option value="Marketing">Marketing</option>
    </select><br><br>
    <label for="dob">Date of Birth:</label>
    <input type="date" id="dob" name="dob" required><br><br>
    <label for="gender">Gender:</label>
    <input type="radio" id="male" name="gender" value="Male" required> Male
    <input type="radio" id="female" name="gender" value="Female" required> Female
    <input type="radio" id="other" name="gender" value="Other" required> Other<br>
```

```
<label for="address">Address:</label><br>
<textarea id="address" name="address" rows="4" cols="30" required></textarea><br>
<label for="resume">Upload Resume:</label>
<input type="file" id="resume" name="resume" required><br>
<input type="submit" value="Register">
</form>
</body>
</html>
```

OUTPUT VIEW:

