



East West University

CSE479: Web Programming

Lab Manual: Lab 3

Design following forms using HTML and inline CSS

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Registration Form

User id: Required and must be of length 5 to 12.

Password: Required and must be of length 7 to 12.

Name: Required and alphabates only.

Address: Optional.

Country: Required. Must select a country.

ZIP Code: Required. Must be numeric only.

Email: Required. Must be a valid email.

Sex: ☐ Male ☐ Female Required.

Language: ☒ English ☐ Non English Required.

About:

Optional.

Sign Up

First Name	<input type="text" value="Enter First Name...."/>
Last Name	<input type="text" value="Enter Last Name...."/>
Screen Name	<input type="text" value="Enter Screen Name...."/>
Date of Birth	<div><div>May ▾</div><div>5 ▾</div><div>1985 ▾</div></div>
Gender	<input type="radio"/> Male <input type="radio"/> Female
Country	<input type="text" value="USA"/> ▾
E-mail	<input type="text" value="Enter E-mail....."/>
Phone	<input type="text" value="Enter Phone....."/>
Password	<input type="password"/>
Confirm Password	<input type="password"/>
<input type="checkbox"/> I agree to the Terms of Use	

submit

Cancel

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Workshop Registration More Actions ▼

[Register now while seats are available!](#)

First Name *	<input type="text"/>	<u>Lunch</u>	
Last Name *	<input type="text"/>	Meal Preference	<input type="text" value="Vegetarian"/>
Company/Institution *	<input type="text"/>	<u>Payment Details</u>	
Address *	<input type="text"/>	Payment Mode	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Demand Draft
City	<input type="text"/>	DD/Cheque No.	<input type="text"/>
State / Province / Region	<input type="text" value="-Select-"/>	Drawn On (Bank Name)	<input type="text"/>
Country	<input type="text" value="-Select-"/>	Payable at	<input type="text"/>
Email *	<input type="text"/>		
Phone Number *	<input type="text"/>		

STUDENT REGISTRATION FORM

FIRST NAME	<input type="text"/>	(max 30 characters a-z and A-Z)																										
LAST NAME	<input type="text"/>	(max 30 characters a-z and A-Z)																										
DATE OF BIRTH	Day: <input type="text"/> Month: <input type="text"/> Year: <input type="text"/>																											
EMAIL ID	<input type="text"/>																											
MOBILE NUMBER	<input type="text"/>	(10 digit number)																										
GENDER	Male <input type="radio"/> Female <input type="radio"/>																											
ADDRESS	<input type="text"/>																											
CITY	<input type="text"/>	(max 30 characters a-z and A-Z)																										
PIN CODE	<input type="text"/>	(6 digit number)																										
STATE	<input type="text"/>	(max 30 characters a-z and A-Z)																										
COUNTRY	<input type="text" value="India"/>																											
HOBBIES	Drawing <input type="checkbox"/> Singing <input type="checkbox"/> Dancing <input type="checkbox"/> Sketching <input type="checkbox"/> Others <input type="checkbox"/> <input type="text"/>																											
QUALIFICATION	<table><thead><tr><th>Sl.No.</th><th>Examination</th><th>Board</th><th>Percentage</th><th>Year of Passing</th></tr></thead><tbody><tr><td>1</td><td>Class X</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>2</td><td>Class XII</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>3</td><td>Graduation</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>4</td><td>Masters</td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></tbody></table> <div>(10 char max) (upto 2 decimal)</div>			Sl.No.	Examination	Board	Percentage	Year of Passing	1	Class X	<input type="text"/>	<input type="text"/>	<input type="text"/>	2	Class XII	<input type="text"/>	<input type="text"/>	<input type="text"/>	3	Graduation	<input type="text"/>	<input type="text"/>	<input type="text"/>	4	Masters	<input type="text"/>	<input type="text"/>	<input type="text"/>
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COURSES APPLIED FOR	BCA <input type="radio"/> B.Com <input type="radio"/> B.Sc <input type="radio"/> B.A <input type="radio"/>																											
<div>Submit Reset</div>																												