Assignment 3

Question 1

Write a program to implement form in HTML.

Figure 1: Form		
Student Registration Form		
Name		
Father Name		
Postal Address		
Personal Address		
Sex	Male	
City	select ▼	
Course	select ▼	
District	select ▼	
State	select ▼	
PinCode		
EmailId		
DOB		
MobileNo		
Reset	Submit Form	

```
Code
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```
form.html
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```
<!DOCTYPE html>
<html lang="en">
<head>
   <meta charset="utf-8">
   <meta name="viewport" content="width=device-width,initial-scale=1.0">
   <title>form</title>
   k rel="stylesheet" href="style.css">
</head>
<body>
   <form id="form1">
       <h3>Student Registration Form</h3>
       <label for="name1">Name:</label> <input type="text" id="name1"><br>
       <label for="name2">Father Name</label> <input type="text" id="name2"><br>
       <label for="address">Postal Address</label> <input type="text" id="address"><br
       <label for="address">Personal Address</label> <input type="text" id="address"><
   \hookrightarrow br>
       <label for="sex">Sex</label>
       <input type="radio" id="male" name="sex">Male
       <input type="radio" id="female" name="sex">Female
       <label for="city">City</label>
       <select id="s1">
           <option>Select..
           <option value="Dehradun">Dehradun
       </select><br>
       <label for="course">Course</label>
       <select id="s2">
           <option>Select..
           <option value="btech">BTech</option>
           <option value="bse">bse</option>
           <option value="mtech">MTech</option>
       </select><br>
       <label for="District">District</label>
       <select id="s3">
           <option>Select..
           <option value="Chamoli">Chamoli
           <option value="Rudrapryag">Rudraprayag</option>
       </select><br>
       <label for="State">State</label>
       <select id="s4">
           <option>Select..
           <option value="uttarakhand">Uttarakhand
       </select><br>
       <label for="pincode">Pincode</label> <input type="number" id="pincode"><br>
       <label for="email">EmailId</label> <input type="text" id="email"><br>
       <label for="dob">DOB</label> <input type="text" id="dob"><br>
```

```
<label for="mobile">Mobile No</label> <input type="number" id="mobile"><br>
        <button type="reset">Reset</putton>
        <button type="submit" value="submit">Submit Form</button>
</body>
</html>
style.css
    font-family: 'Times New Roman', Times, serif;
}
#form1 {
    background-color: #99ffff;
    padding: 10px;
    max-width: 280px;
    margin: auto;
}
label {
  display: inline-block;
  width: 80px;
}
label, input {
  margin: 3px;
```

Figure 2: Output Form

Student Registration Form	
Name:	
Father Name	
Postal Address	
Personal Address	
Sex	Male Female
City	Select v
Course	Select 🗸
District	Select v
State	Select v
Pincode	\$
EmailId	
DOB	
Mobile No	\$
Reset Submi	it Form