

GANPAT UNIVERSITY
U.V. PATEL COLLEGE OF ENGINEERING B. TECH 1ST
SEMESTER CE/IT/CE-AI 2ES1109: BASICS OF WEB
TECHNOLOGY

Practical -4

AIM: To explore HTML Frame and Form tags including their attributes.

PRACTICAL 4.1:

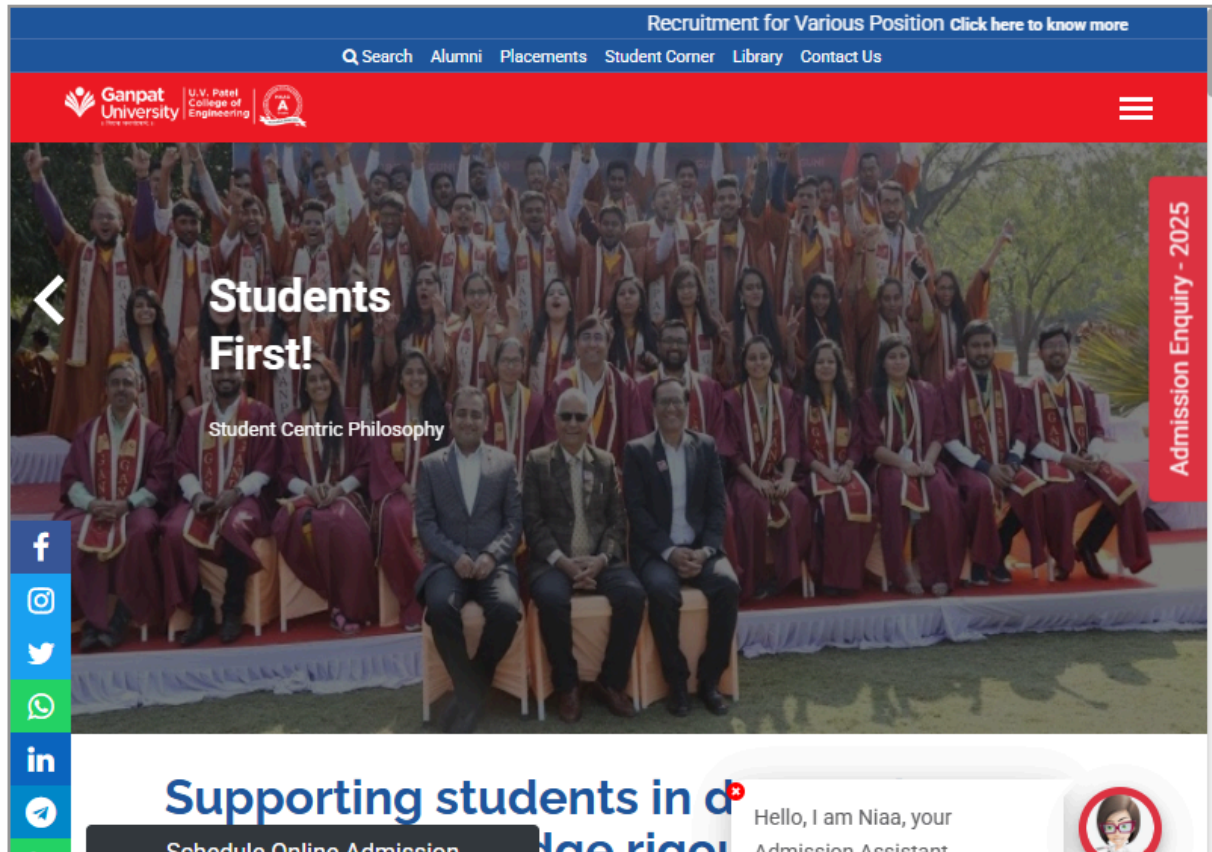
1. Create a frame using the iframe tag.

CODE:

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Iframe Example</title>
</head>
<body>
  <h1>Exploring HTML Iframe</h1>
  <p>Below is an example of an embedded frame using the iframe tag:</p>
  <iframe src="https://uvpce.guni.ac.in/" width="800" height="600" title="Ganpat University
Website">
    Your browser does not support iframes.
  </iframe>
</body>
</html>
```

OUTPUT:**Exploring HTML Iframe**

Below is an example of an embedded frame using the `iframe` tag:



PRACTICAL 4.2:

2. Write an HTML code to create the following output with navigation of the frame.

CODE:

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<frameset rows="15%,30%,10%,35%,10%">
  <frameset cols="20%,80%">
    <frame src="frame_a.html"></frame>
    <frame src="frame_b.html"></frame>
  </frameset>
  <frameset cols="20%,55%,25%">
    <frame src="frame_d.html"></frame>
    <frame src="target.html"></frame>
    <frame src="news.html"></frame>
  </frameset>
  <frameset cols="100%">
    <frame src="photo gallery.html"></frame>
  </frameset>
  <frameset cols="50%,50%">
    <frame src="scrolling1.html"></frame>
    <frame src="scrolling2.html"></frame>
  </frameset>
  <frameset cols="100%">
    <frame src="uvpcelink.html"></frame>
  </frameset>
</frameset>
</html>
```

1.frame_a.html

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

```
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  
</body>
</html>
```

2.frame_b.html

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  <h1><center>U. V. Patel College of Engineering</center></h1>
</body>
</html>
```

3.frame_d.html

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  <pre>
    <a href="about.html">1. About</a><br>
    <a href="department.html">2. department</a><br>
    <a href="academics.html">3. academics</a><br>
    <a href="events.html">4. event</a><br>
```

```
<a href="about.html">5. About Us</a>
</pre>
</body>
</html>
```

4.target.html

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  <p><center>TARGET AREA</center></p>
</body>
</html>
```

5.news.html

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  <h3>News Section</h3>
  <font color="red">
    <marquee direction="down" behavior="scroll" scrollamount="2">
      <p>40% of students have been placed in our course. The highest package is 5
LPA, the lowest package is 1 LPA<br>
        Placements are average, and about 65-70% of students get placed.<br>
        The GUJCET 2025 counselling process has closed with the release of Round 3
seat allotment results for Ganpat University admission to BE/BTech courses.<br>
        The university is approved by the UGC and AICTE. Ganpat University Kherva
offers undergraduate, postgraduate, PhD, diploma and certification programmes <br>
```

The NEET UG Counselling 2025 Round 2 final seat allotment results have been released for admission to MBBS and BDS courses. Candidates allotted seats in this round are required to report to their respective institutes by Sep 25, 2025.</p>

</marquee>

</body>

</html>

6. photo gallery .html

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

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

<title>Document</title>

</head>

<body bgcolor="#E1BBFC">

<p><center>Photo Gallery</center></p>

</body>

</html>

7.scrolling1.html

<!DOCTYPE html>

<html lang="en">

<head>

<meta charset="UTF-8">

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

<title>Document</title>

</head>

<body>

<marquee direction="right" behavior="scroll" scrollamount="3">

<p>

</p>

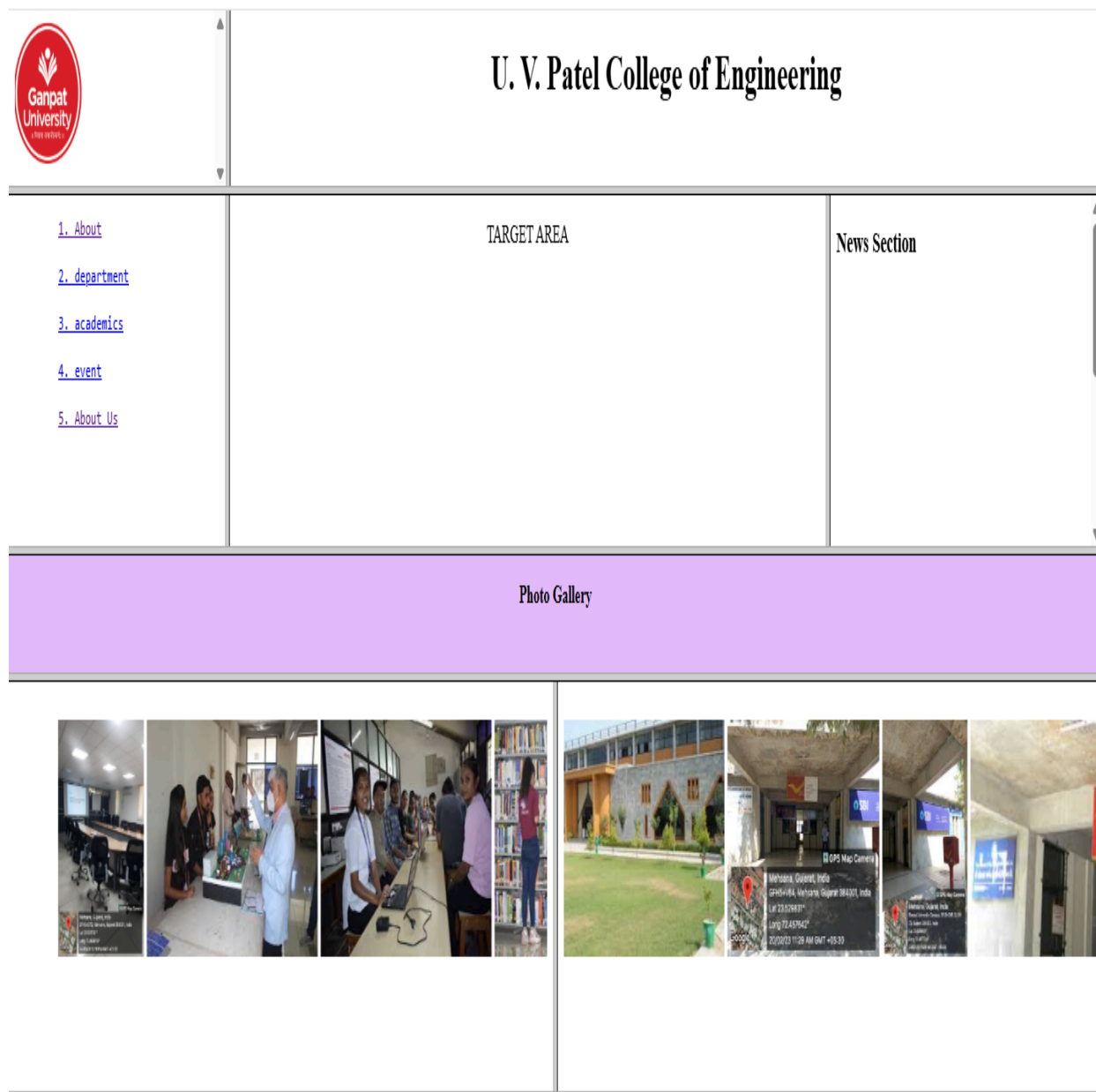
</marquee>

```
</body>
</html>
```

8.scrolling2.html

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
</head>
<body>
  <marquee direction="left" behavior="scroll" scrollamount="3">
    <p>
      
      
      
      
      
      
      
    </p>
  </marquee>

</body>
</html>
```

OUTPUT:

<http://www.uvpc.ac.in>

PRACTICAL 4.3:

Write HTML code to generate the following output using <form> tag

CODE:

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>PRACTICAL 4.3</title>
</head>
<body>

  <h2>DOM Legend Form Property</h2>


  <form>
    <fieldset>
      <legend>STUDENT ::</legend>
      <table>
        <tr>
          <td><label for="nameInput">Name</label></td>
          <td><input type="text" name="Name" id="nameInput"></td>
        </tr>
        <tr>
          <td><label for="emailInput">Email</label></td>
          <td><input type="email" name="email" id="emailInput"></td>
        </tr>
        <tr>
          <td><label for="dobInput">Date of birth</label></td>
          <td><input type="date" name="date" id="dobInput"></td>
        </tr>
        <tr>
          <td><label for="addressTextarea">Address</label></td>
          <td><textarea rows="3" cols="30" name="address"
id="addressTextarea"></textarea></td>
        </tr>
        <tr>
          <td><label for="enrollmentInput">Enrollment no.</label></td>
```

```
<td><input type="text" name="enrollment" size="12" id="enrollmentInput"></td>
</tr>
</table>
</fieldset>
<br/>
<input type="submit">
</form>

</body>
</html>
```

OUTPUT:**DOM Legend Form Property**

STUDENT ::

Name	<input type="text"/>
Email	<input type="text"/>
Date of birth	<input type="text" value="dd-mm-yyyy"/> 
Address	<input type="text"/>
Enrollment no.	<input type="text"/>

PRACTICAL 4.4:

Write HTML code to generate the following output:

CODE:

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>PRACTICAL 4.4</title>
</head>
<body>
  <form>
    <fieldset>
      <legend></legend>
      <table>
        <tr>
          <td>Enter Name of your friend</td><td><input type="text" name="name of friend"></td>
        </tr>
        <tr>
          <td>Choose the file you want to post to your friend</td>
        </tr>
        <tr>
          <td><input type="file" name="file to post"></td>
        </tr>
        <tr>
          <td>What does this file contain?</td>
        </tr>
        <tr>
          <td><input type="checkbox" name="image" value="image" checked> image
            <input type="checkbox" name="source code" value="source code" checked> source code
            <input type="checkbox" name="binary code" value="binary code"> binary code</td>
        </tr>
        <tr>
          <td>You have completed the form.
            <input type="submit" value="Submit Query" name="Submit Query"></td>
        </tr>
      </table>
    </fieldset>
  </form>
</body>
</html>
```

```
</fieldset>  
</form>  
</body>  
</html>
```

OUTPUT :

Enter Name of your friend

Choose the file you want to post to your friend

Choose File

No file chosen

What does this file contain?

☒ image ☒ source code ☐ binary code

You have completed the form.

Submit Query

PRACTICAL 4.5:**5. Write HTML code to generate the following output:****CODE:**

```

<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>PRACTICAL 4.5</title>
</head>
<body>
  <table width="50%" cellpadding="0" bgcolor="lightgray">
    <tr>
      <td align="right" colspan="2" bgcolor="F2F2F2"><u>Student Registration
Form</u></td>
    </tr>
    <tr>
      <td><label for="first name">First Name:</label></td>
      <td><input type="text" placeholder="Enter your first name" size="50" id="first name"
required autofocus></td>
    </tr>
    <tr>
      <td><label for="last name">last Name:</label></td>
      <td><input type="text" placeholder="Enter your last name" size="50" id="last name"
required></td>
    </tr>
    <tr>
      <td><label for="email">email:</label></td>
      <td><input type="email" placeholder="It should contain @." size="50" id="email"
required></td>
    </tr>
    <tr>
      <td><label for="mobile">mobile:</label></td>
      <td><input type="tel" placeholder="only 10 digits are allowed." id="mobile"
name="mobile" pattern="[0-9]{10}" maxlength="10" inputmode="numeric" required></td>
    </tr>
  </table>

```

```



        <td><label for="gender">Gender:</label></td>
        <td><input type="radio" name="gender" id="male" value="male">Male
        <input type="radio" name="gender" id="female" value="female">Female</td>
    </tr>
    <tr>
        <td><label for="Date of Birth">Date of Birth</label></td>
        <td><input type="date" id="Date of Birth"></td>
    </tr>
    <tr>
        <td><label for="address">Address:</label></td>
        <td><textarea rows="5" cols="48" id="address"></textarea></td>
    </tr>
    <tr>
        <td><label for="city">City:</label></td>
        <td><input type="text" size="50" required id="city"></td>
    </tr>
    <tr>
        <td><label for="Area PIN">Area PIN:</label></td>
        <td><input type="text" id="pincode" name="pincode" pattern="[0-9]{6}"
maxlength="6" inputmode="numeric" required></td>
    </tr>
    <tr>
        <td><label for="state">State:</label></td>
        <td><input type="text" size="50" required id="state"></td>
    </tr>
    <tr>
        <td><label for="Qualification">Qualification:</label></td>
        <td>
            <select>
                <optgroup label="Select Qualification">
                    <option value="10">10th pass</option>
                    <option value="12">12th pass</option>
                    <option value="graduate">Graduate</option>
                    <option value="post graduate">Post Graduate</option>
                </optgroup>
            </select>
        </td>
    </tr>
    <tr>
        <td rowspan="4" valign="top"><label
for="Specialization">Specialization:</label></td>

```

```
<td><input type="checkbox" name="Computer Science" id="Specialization"
value="Computer Science">Computer Science</td></tr>
<tr><td><input type="checkbox" name="Information Technology"
id="Specialization" value="Information Technology">Information Technology</td></tr>
<tr><td><input type="checkbox" name="Computer Architecture" id="Specialization"
value="Computer Architecture">Computer Architecture</td></tr>
<tr><td><input type="checkbox" name="Tele Communication" id="Specialization"
value="Tele Communication">Tele Communication</td></tr>
</tr>
<td><label for="Password">Password:</label></td>
<td><input type="password" id="Password" name="Password" pattern="[0-9]{6}"
required></td>
</tr>
<td><input type="submit" name="registerd" value="registered"></td>
</tr>
</table>
</body>
</html>
```

OUTPUT :

Student Registration Form

First Name:	<input type="text" value="Enter your first name"/>
Last Name:	<input type="text" value="Enter your last name"/>
email:	<input type="text" value="It should contain @."/>
mobile:	<input type="text" value="only 10 digits are allowed."/>
Gender:	<input type="radio"/> Male <input type="radio"/> Female
Date of Birth	<input type="text" value="dd-mm-yyyy"/> 
Address:	<div><div></div></div>
City:	<input type="text"/>
Area PIN:	<input type="text"/>
State:	<input type="text"/>
Qualification:	<input type="text" value="10th pass"/> 
Specialization:	<input type="checkbox"/> Computer Science <input type="checkbox"/> Information Technology <input type="checkbox"/> Computer Architecture <input type="checkbox"/> Tele Communication
Password:	<input type="password"/>