WEEKLY ASSIGNMENT 1

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COURSE: MODERN APPLICATION DEVELOPMENT JAVA SPRING

BOOT

HTML FORMS WITH INPUTS AND CSS STLYING FOR THE HTML FILE AS A INTERNAL CSS CODE

CODE:

```
<!DOCTYPE html>
<html>
<head>
<title>User Registration Form</title>
 <style>
  body {
   font-family: Arial, sans-serif;
   background-color: #f2f2f2;
  }
  .container {
   max-width: 400px;
   margin: 0 auto;
   background-color: #fff;
   padding: 20px;
   margin-top:100px;
   padding-bottom: 40px;
```

```
border-radius: 5px;
box-shadow: 0 2px 5px rgba(0, 0, 0, 0.1);
}
.container h2 {
text-align: center;
}
.form-group {
margin-bottom: 20px;
}
.form-group label {
display: block;
font-weight: bold;
margin-bottom: 5px;
}
.form-group input[type="text"],
.form-group input[type="password"],
.form-group input[type="radio"],
.form-group input[type="checkbox"] {
width: 100%;
 padding: 8px;
border: 1px solid #ccc;
border-radius: 4px;
box-sizing: border-box;
}
.form-group input[type="radio"],
.form-group input[type="checkbox"] {
```

```
float:left;
   width: auto;
  }
  .form-group input[type="submit"] {
   background-color: #4CAF50;
   color: #fff;
   border: none;
   padding: 10px 20px;
   border-radius: 4px;
   cursor: pointer;
   float: right;
  }
  .form-group input[type="submit"]:hover {
   background-color: #45a049;
  }
</style>
</head>
<body>
 <div class="container">
  <h2>Account Registration</h2>
  <form>
   <div class="form-group">
    <label for="username">Username:</label>
    <input type="text" id="username" name="username" required>
   </div>
   <div class="form-group">
    <label for="password">Password:</label>
    <input type="password" id="password" name="password" required>
```

```
</div>
   <div class="form-group">
    <label>Gender:</label>
    <input type="radio" id="male" name="gender" value="male" required>
    <label for="male">Male</label>
    <input type="radio" id="female" name="gender" value="female" required>
    <label for="female">Female</label>
   </div>
   <div class="form-group">
    <label>Hobbies:</label>
    <input type="checkbox" id="singing" name="hobbies" value="singing">
    <label for="singing">Singing</label>
    <input type="checkbox" id="dancing" name="hobbies" value="dancing">
    <label for="dancing">Dancing</label>
    <input type="checkbox" id="playing" name="hobbies" value="playing">
    <label for="playing">Playing</label>
   </div>
   <div class="form-group">
    <input type="submit" value="Register Here >>>">
   </div>
</body>
</html>
```

OUTPUT SCREENSHOTS:

Username:			
Password:			
Gender:			
○ Male○ Female			
Hobbies: Singing Dancing Playing			
Flaying	Register Here >	>>	