

**School of Engineering & Technology**

**Paralakhemundi Campus**

**Applied and Action Learning\***

Experiment No: Date:

Aim

Write a HTML code to create the registration form and validate using javascript.

**Software‘s / Material, Tools & Equipment required (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Slno.** | **Name** | **Specification** | **Qnty.** |
| 1  2 | Personal laptop  XAMP | Asus, 8th Generation, 8 GB RAM.  3.2.2 | 1  1 |

**\*Hands on & experimental Learning Page No:**

<!DOCTYPE html>

<html>

<head>

    <title></title>

    <link rel="stylesheet" href="https://maxcdn.bootstrapcdn.com/bootstrap/4.0.0/css/bootstrap.min.css">

<!-- jQuery library -->

<script src="https://ajax.googleapis.com/ajax/libs/jquery/3.3.1/jquery.min.js"></script>

<!-- Popper JS -->

<script src="https://cdnjs.cloudflare.com/ajax/libs/popper.js/1.12.9/umd/popper.min.js"></script>

<!-- Latest compiled JavaScript -->

<script src="https://maxcdn.bootstrapcdn.com/bootstrap/4.0.0/js/bootstrap.min.js"></script>

</head>

<body>

    <div class="container"><br>

        <div class="col-lg-6 m-auto d-block">

            <form action="#" onsubmit="return validation()" class="bg-light">

                <div class="form-group">

                    <label for="user" class="font-weight-bold"> Username: </label>

                    <input type="text" name="user" class="form-control" id="user" autocomplete="off">

                    <span id="username" class="text-danger font-weight-bold"> </span>

                </div>

                <div class="form-group">

                    <label class="font-weight-bold"> Password: </label>

                    <input type="text" name="pass" class="form-control" id="pass" autocomplete="off">

                    <span id="passwords" class="text-danger font-weight-bold"> </span>

                </div>

**Learning Page No:**

**CODING**

**\*Hands on & experimental Learning Page No:**

<div class="form-group">

                    <label class="font-weight-bold"> Mobile Number: </label>

                    <input type="text" name="mobile" class="form-control" id="mobileNumber" autocomplete="off">

                    <span id="mobileno" class="text-danger font-weight-bold"> </span>

                </div>

                <div class="form-group">

                    <label class="font-weight-bold"> Email: </label>

                    <input type="text" name="email" class="form-control" id="emails" autocomplete="off">

                    <span id="emailids" class="text-danger font-weight-bold"> </span>

                </div>

                <input type="submit" name="submit" value="submit" class="btn btn-danger">

            </form><br><br>

        </div>

    </div>

    <script type="text/javascript">

        function validation(){

            var user = document.getElementById('user').value;

            var pass = document.getElementById('pass').value;

            var mobileNumber = document.getElementById('mobileNumber').value;

            var emails = document.getElementById('emails').value;

if(user == ""){

                document.getElementById('username').innerHTML =" \*\* Please fill the username field";

                return false;

            }

            if((user.length <= 2) || (user.length > 20)) {

                document.getElementById('username').innerHTML =" \*\* Username lenght must be between 2 and 20";

                return false;

            }

            if(!isNaN(user)){

                document.getElementById('username').innerHTML =" \*\* only characters are allowed";

                return false;

            }

**Learning Page No:**

**CODING**

**\*Hands on & experimental Learning Page No:**

if(mobileNumber == ""){

                document.getElementById('mobileno').innerHTML =" \*\* Please fill the mobile NUmber field";

                return false;

            }

            if(isNaN(mobileNumber)){

                document.getElementById('mobileno').innerHTML =" \*\* user must write digits only not characters";

                return false;

            }

            if(mobileNumber.length!=10){

                document.getElementById('mobileno').innerHTML =" \*\* Mobile Number must be 10 digits only";

                return false;

            }

            if(emails == ""){

                document.getElementById('emailids').innerHTML =" \*\* Please fill the email idx` field";

                return false;

            }

            if(emails.indexOf('@') <= 0 ){

                document.getElementById('emailids').innerHTML =" \*\* @ Invalid Position";

                return false;

            }

            if((emails.charAt(emails.length-4)!='.') && (emails.charAt(emails.length-3)!='.')){

                document.getElementById('emailids').innerHTML =" \*\* . Invalid Position";

                return false;

            }

        }

    </script>

</body>

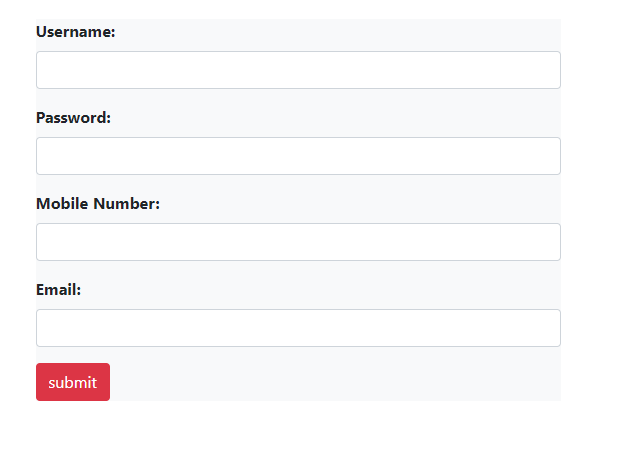
</html>

**Learning Page No:**

**CODING**

**\*Hands on & experimental Learning Page No:**

**Conclusion / Inference:**



**Learning Page No:**

Assessment

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Marking Procedure** | | **Full Marks** | | **Marks Obtained** | | **Remarks** | |
| Accuracy  & Process | Conduct of Experiment | | 10 | |  | |  | |
| Observation/Calculation/Implementation | | 10 | |  | |  | |
| Result / Inference / Output | | 10 | |  | |  | |
| Observation | | 5 | |  | |  | |
| Report | Observations(5), Implantation(20) | | 25 | |  | |  | |
| Viva |  | | 10 | |  | |  | |
| Inference |  | | 30 | |  | |  | |
| Total |  | | 100 | |  | |  | |

**Signature of Faculty Signature of the Student**

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