

Web Programming
Lab 3: Bootstrap

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Q1) Design the student bio-data form using button, label, textbox, radio button, table and checkbox

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

<head>
  <meta charset="UTF-8">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <link href="https://cdn.jsdelivr.net/npm/bootstrap@5.3.3/dist/css/bootstrap.min.css"
rel="stylesheet"
  integrity="sha384-
QWTKZyjpPEjISv5WaRU9OFeRpok6YctnYmDr5pNlyT2bRjXh0JMhY6hW+ALEwIH"
crossorigin="anonymous">
  <title>Student Bio-Data</title>
</head>
<style>
  * {
    padding: 0;
    margin: 0;
  }
  .form-class{
    margin: 0 50px 50px 50px;
  }
  h2{
    text-align: center;
    margin: 10px;
  }
  .container{
    background-color: rgb(187,
214, 205);
    padding: 10px;
    margin: 10px;
  }
</style>

<body>
  <div class="container">
    <h2> Student Biodata Form</h2>
    <form class="form-class">
      <div class="form-group">
        <label for="name">Name</label>
        <input type="text" class="form-control" id="name" placeholder="Enter name">
      </div>
```

Grade	Marks
10th	97.6%
12th	96.4%

```

<div class="form-group">
  <label for="age">Age</label>
  <input type="number" class="form-control" id="age" placeholder="Enter Age" min="0"
max="100">
</div>
<div class="form-check">
  <div>
    <input type="checkbox" class="form-check-input" id="HTML">
    <label class="form-check-label" for="HTML">HTML</label>
  </div>
  <div>
    <input type="checkbox" class="form-check-input" id="CSS">
    <label class="form-check-label" for="CSS">CSS</label>
  </div>
  <div>
    <input type="checkbox" class="form-check-input" id="JS">
    <label class="form-check-label" for="JS">JS</label>
  </div>
</div>
<div class="form-group">
  <label for="exampleFormControlTextarea1">Description</label>
  <textarea class="form-control" id="exampleFormControlTextarea1"
rows="3"></textarea>
</div>
<div class="form-check">
  <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios1" value="option1"
checked>
  <label class="form-check-label" for="exampleRadios1">
    Male
  </label>
</div>
<div class="form-check">
  <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios2" value="option2">
  <label class="form-check-label" for="exampleRadios2">
    Female
  </label>
</div>
<div>
  <table class="table">
    <thead>
      <tr>
        <th scope="col">Grade</th>
        <th scope="col">Marks</th>
      </tr>
    </thead>
    <tbody>
      <tr>
        <td>10th</td>
        <td>97.6%</td>
      </tr>
    </tbody>
  </table>

```

```

        <tr>
            <td>12th</td>
            <td>96.4%</td>
        </tr>
    </tbody>
</table>
</div>
<button type="submit" class="btn btn-primary">Submit</button>
</form>
</div>
</body>

</html>

```

Q2) Design a web page which shows the database oriented CRUD operation. Consider Employee data.

```

<!DOCTYPE html>
<html lang="en">
<head>
    <meta charset="UTF-8">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <title>Lab3 q 3</title>
    <link rel="stylesheet"
href="https://cdn.jsdelivr.net/npm/bootstrap@4.4.1/dist/css/bootstrap.min.css" integrity="sha384-
Vkoo8x4CGsO3+Hhxv8T/Q5PaXtkKtu6ug5TOeNV6gBiFeWPGFN9MuhOf23Q9Ifjh"
crossorigin="anonymous">
</head>

<body>
    <div class="container-fluid">
        <div class="row" style="background-color: rgb(188, 229, 229); padding: 50px;">
            <form>
                <span class="badge badge-primary">Top Part</span>
                <div class="mb-3">
                    <label for="exampleInputEmail1" class="form-label">Email address</label>
                    <input type="email" class="form-control" id="exampleInputEmail1" aria-
describedby="emailHelp">
                    <div id="emailHelp" class="form-text">We'll never share your email with anyone
else.</div>
                </div>
                <div class="mb-3">
                    <label for="exampleInputPassword1" class="form-label">Password</label>
                    <input type="password" class="form-control" id="exampleInputPassword1">
                </div>
                <div class="mb-3 form-check">
                    <input type="checkbox" class="form-check-input" id="exampleCheck1">
                    <label class="form-check-label" for="exampleCheck1">Check me out</label>
                </div>
                <button type="submit" class="btn btn-primary">Submit</button>
            </form>
        </div>
    </div>
    <div class="row">

```

```

<div class="col" style="background-color: rgb(188, 192, 229); padding: 50px;">
  <form>
    <span class="badge badge-dark">Bottom Part Column 1</span>
    <div class="form-group">
      <label for="exampleFormControlInput1">Email address</label>
      <input type="email" class="form-control" id="exampleFormControlInput1"
placeholder="name@example.com">
    </div>
    <div class="form-group">
      <label for="exampleFormControlSelect1">Example select</label>
      <select class="form-control" id="exampleFormControlSelect1">
        <option>1</option>
        <option>2</option>
        <option>3</option>
        <option>4</option>
        <option>5</option>
      </select>
    </div>
    <div class="form-group">
      <label for="exampleFormControlSelect2">Example multiple select</label>
      <select multiple class="form-control" id="exampleFormControlSelect2">
        <option>1</option>
        <option>2</option>
        <option>3</option>
        <option>4</option>
        <option>5</option>
      </select>
    </div>
    <div class="form-group">
      <label for="exampleFormControlTextarea1">Example textarea</label>
      <textarea class="form-control" id="exampleFormControlTextarea1"
rows="3"></textarea>
    </div>
  </form>
</div>
<div class="col" style="background-color: rgb(188, 229, 198); padding: 50px;">
  <div class="form-check">
    <span class="badge badge-info">Bottom Part Column 2</span>
    <br>
    <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios1" value="option1" checked>
    <label class="form-check-label" for="exampleRadios1">
      Default radio
    </label>
  </div>
  <div class="form-check">
    <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios2" value="option2">
    <label class="form-check-label" for="exampleRadios2">
      Second default radio
    </label>
  </div>

```

```

        <div class="form-check disabled">
            <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios3" value="option3" disabled>
            <label class="form-check-label" for="exampleRadios3">
                Disabled radio
            </label>
        </div>
    </div>
    <div class="col" style="background-color: rgb(213, 188, 229); padding: 50px;">
        <form>
            <span class="badge badge-success">Bottom Part Column 3</span>
            <div class="form-row">
                <div class="form-group col-md-6">
                    <label for="inputEmail4">Email</label>
                    <input type="email" class="form-control" id="inputEmail4" placeholder="Email">
                </div>
                <div class="form-group col-md-6">
                    <label for="inputPassword4">Password</label>
                    <input type="password" class="form-control" id="inputPassword4"
placeholder="Password">
                </div>
            </div>
            <div class="form-group">
                <label for="inputAddress">Address</label>
                <input type="text" class="form-control" id="inputAddress" placeholder="1234 Main
St">
            </div>
            <div class="form-group">
                <label for="inputAddress2">Address 2</label>
                <input type="text" class="form-control" id="inputAddress2"
placeholder="Apartment, studio, or floor">
            </div>
            <div class="form-row">
                <div class="form-group col-md-6">
                    <label for="inputCity">City</label>
                    <input type="text" class="form-control" id="inputCity">
                </div>
                <div class="form-group col-md-4">
                    <label for="inputState">State</label>
                    <select id="inputState" class="form-control">
                        <option selected>Choose...</option>
                        <option>...</option>
                    </select>
                </div>
                <div class="form-group col-md-2">
                    <label for="inputZip">Zip</label>
                    <input type="text" class="form-control" id="inputZip">
                </div>
            </div>
            <div class="form-group">
                <div class="form-check">
                    <input class="form-check-input" type="checkbox" id="gridCheck">

```

```

        <label class="form-check-label" for="gridCheck">
            Check me out
        </label>
    </div>
</div>
<button type="submit" class="btn btn-primary">Sign in</button>
</form>
</div>
</div>
</div>
</body>
</html>

```

Employee CRUD Operations

Employee ID

Employee Name

Employee Email

Employee Phone

Department

Add Employee
Update Employee

Employee ID	Name	Email	Phone	Department	Actions
1737109592650	abc	abc@gmail.com	123456789	xyz	Edit Delete
1737109616507	def	def@gmail.com	987654321	pqr	Edit Delete

Q3) Create a web page using bootstrap as mentioned. Divide the page in to 2 parts top and bottom, then divide the bottom into 3 parts and design each top and bottom part using different input groups, input, badges, buttons and button groups. Make the design more attractive.

```

<!DOCTYPE html>
<html lang="en">
<head>
    <meta charset="UTF-8">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <title>Lab3 q 3</title>
    <link rel="stylesheet"
href="https://cdn.jsdelivr.net/npm/bootstrap@4.4.1/dist/css/bootstrap.min.css" integrity="sha384-
Vkoo8x4CGsO3+Hhvx8T/Q5PaXtkKtu6ug5TOeNV6gBiFeWPGFN9MuhOf23Q9Ifjh"
crossorigin="anonymous">
</head>

<body>
    <div class="container-fluid">
        <div class="row" style="background-color: rgb(188, 229, 229); padding: 50px;">

```

```

<form>
  <span class="badge badge-primary">Top Part</span>
  <div class="mb-3">
    <label for="exampleInputEmail1" class="form-label">Email address</label>
    <input type="email" class="form-control" id="exampleInputEmail1" aria-
describedby="emailHelp">
    <div id="emailHelp" class="form-text">We'll never share your email with anyone
else.</div>
  </div>
  <div class="mb-3">
    <label for="exampleInputPassword1" class="form-label">Password</label>
    <input type="password" class="form-control" id="exampleInputPassword1">
  </div>
  <div class="mb-3 form-check">
    <input type="checkbox" class="form-check-input" id="exampleCheck1">
    <label class="form-check-label" for="exampleCheck1">Check me out</label>
  </div>
  <button type="submit" class="btn btn-primary">Submit</button>
</form>
</div>
<div class="row">
  <div class="col" style="background-color: rgb(188, 192, 229); padding: 50px;">
    <form>
      <span class="badge badge-dark">Bottom Part Column 1</span>
      <div class="form-group">
        <label for="exampleFormControlInput1">Email address</label>
        <input type="email" class="form-control" id="exampleFormControlInput1"
placeholder="name@example.com">
      </div>
      <div class="form-group">
        <label for="exampleFormControlSelect1">Example select</label>
        <select class="form-control" id="exampleFormControlSelect1">
          <option>1</option>
          <option>2</option>
          <option>3</option>
          <option>4</option>
          <option>5</option>
        </select>
      </div>
      <div class="form-group">
        <label for="exampleFormControlSelect2">Example multiple select</label>
        <select multiple class="form-control" id="exampleFormControlSelect2">
          <option>1</option>
          <option>2</option>
          <option>3</option>
          <option>4</option>
          <option>5</option>
        </select>
      </div>
      <div class="form-group">
        <label for="exampleFormControlTextarea1">Example textarea</label>

```

```

        <textarea class="form-control" id="exampleFormControlTextarea1"
rows="3"></textarea>
    </div>
</form>
</div>
<div class="col" style="background-color: rgb(188, 229, 198); padding: 50px;">
    <div class="form-check">
        <span class="badge badge-info">Bottom Part Column 2</span>
        <br>
        <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios1" value="option1" checked>
        <label class="form-check-label" for="exampleRadios1">
            Default radio
        </label>
    </div>
    <div class="form-check">
        <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios2" value="option2">
        <label class="form-check-label" for="exampleRadios2">
            Second default radio
        </label>
    </div>
    <div class="form-check disabled">
        <input class="form-check-input" type="radio" name="exampleRadios"
id="exampleRadios3" value="option3" disabled>
        <label class="form-check-label" for="exampleRadios3">
            Disabled radio
        </label>
    </div>
</div>
<div class="col" style="background-color: rgb(213, 188, 229); padding: 50px;">
    <form>
        <span class="badge badge-success">Bottom Part Column 3</span>
        <div class="form-row">
            <div class="form-group col-md-6">
                <label for="inputEmail4">Email</label>
                <input type="email" class="form-control" id="inputEmail4" placeholder="Email">
            </div>
            <div class="form-group col-md-6">
                <label for="inputPassword4">Password</label>
                <input type="password" class="form-control" id="inputPassword4"
placeholder="Password">
            </div>
        </div>
        <div class="form-group">
            <label for="inputAddress">Address</label>
            <input type="text" class="form-control" id="inputAddress" placeholder="1234 Main
St">
        </div>
        <div class="form-group">
            <label for="inputAddress2">Address 2</label>

```



```

        <input type="text" class="form-control" id="inputAddress2"
placeholder="Apartment, studio, or floor">
    </div>
    <div class="form-row">
        <div class="form-group col-md-6">
            <label for="inputCity">City</label>
            <input type="text" class="form-control" id="inputCity">
        </div>
        <div class="form-group col-md-4">
            <label for="inputState">State</label>
            <select id="inputState" class="form-control">
                <option selected>Choose...</option>
                <option>...</option>
            </select>
        </div>
        <div class="form-group col-md-2">
            <label for="inputZip">Zip</label>
            <input type="text" class="form-control" id="inputZip">
        </div>
    </div>
    <div class="form-group">
        <div class="form-check">
            <input class="form-check-input" type="checkbox" id="gridCheck">
            <label class="form-check-label" for="gridCheck">
                Check me out
            </label>
        </div>
    </div>
    <button type="submit" class="btn btn-primary">Sign in</button>
</form>
</div>
</div>
</div>
</body>
</html>

```

Top Part

Email address

We'll never share your email with anyone else.

Password

☐ Check me out

Submit

Bottom Part Column 1

Email address

name@example.com

Example select

1

Example multiple select

1
2
3
4

Example textarea

Bottom Part Column 2

☒ Default radio
☐ Second default radio
☐ Disabled radio

Bottom Part Column 3

Email

1234 Main St

Address 2

Apartment, studio, or floor

City

State

Choose...

Zip

☐ Check me out

Sign in