

Web-Based Interfaced Design

Lab Report CSF3133 (K4)

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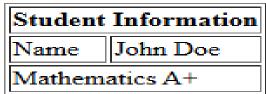




Name Subject Grade

John Doe Mathematics A

Jane Smith Science B+



Activity 2 Output:



Registration form

First Name:]			
Last Name:)			
Gender: O Male O Female Submit					
Select your hobbies: Reading Gaming Choose a country: USA V					
Submit	Canada UAE				

Activity 3

Output:



Welcome to My Web Page

Home | About | Contact

Article Tittle

This is an article about web development.

Copyright © 2024 My Web Page

Lab Exercise

Coding:

```
<!DOCTYPE html>
<html lang="en">
   <meta charset="UTF-8">
    <meta name="viewport" content="width=device-width, initial-scale=1.0">
    <title>Document</title>
</head>
<body>
   <header>
       <h1>Welcome to My Web Page</h1>
    </header>
    <nav>
       <a href="#home">Home</a> | <a href="#about">About</a> |
       <a href="#contact">Contact</a>
    </nav>
    <section>
       <article>
           <h2>My Simple Introduction</h2>
           This is an article about web development.
       </article>
    </section>
```

```
Personal Information
       Name<br>
           John Wick
       Age
           22 years old
       Occupation<br>
           student
       <h2>Contact information</h2>
   <form action="submit form.php" method="post">
       <label for="name">Name: </label><br>
       <input type="text" id="name" name="name"><br><br>
       <label for="email">Email: </label><br>
       <input type="text" id="email" name="email"><br><br>
       <label for="gender">Gender: </label><br>
       <input type="radio" id="male" name="gender" value="male">
       <label for="male">Male </label><br>
       <input type="radio" id="female" name="gender" value="female" <label</pre>
for="female">Female </label><br><br>
       <input type="submit" value="Submit">
   </form>
   <form action="submit form.php" method="post"><br><br>
       <label for="hobby">Select your hobbies: </label><br>
       <input type="checkbox" id="hobby1" name="hobby1" value="Reading"</pre>
<label for="hobby1">Reading</label><br>
       <input type="checkbox" id="hobby2" name="hobby2" value="Gaming" <label</pre>
for="hobby2">Gaming</label><br>
       <input type="checkbox" id="hobby3" name="hobby3" value="Coding" <label</pre>
for="hobby3">Coding</label><br>
       <label for="character">Choose a character: </label>
       <select id="character" name="character">
           <option value="introvert">Introvert</option>
           <option value="extrovert">Extrovert</option>
           <option value="ambivert">Ambivert</option>
       </select><br><br></
       <input type="submit" value="Submit">
```

