



SNS COLLEGE OF TECHNOLOGY

(An AUTONOMOUS INSTITUTION)



RE-ACCREDITED BY NAAC WITH A+ GRADE, ACCREDITED BY NBA(CSE, IT, ECE, EEE & MECHANICAL)

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DEPARTMENT OF MASTER COMPUTER APPLICATION

HTML INTRODUCTION

19CAT601 - WEB PROGRAMMING ESSENTIALS

UNIT-I - ADVANCED HTML - HTML5 Form Elements

I MCA – I SEM

HTML - <form> Tag

Form Elements

The HTML <form> tag is used for creating a form for user input. A form can contain

- textfields,
- checkboxes,
- radio-buttons and more.

Forms are used to pass user-data to a specified URL.

The <form> Element

The HTML <form> element is used to create an HTML form for user input:

<form>

form elements

</form>

The <form> element is a container for different types of input elements, such as: text fields, checkboxes, radio buttons, submit buttons, etc.

The <input> Element

The HTML <input> element is the most used form element.

An <input> element can be displayed in many ways, depending on the type attribute.

Here are some examples:

Type	Description
<code><input type="text"></code>	Displays a single-line text input field
<code><input type="radio"></code>	Displays a radio button (for selecting one of many choices)
<code><input type="checkbox"></code>	Displays a checkbox (for selecting zero or more of many choices)
<code><input type="submit"></code>	Displays a submit button (for submitting the form)
<code><input type="button"></code>	Displays a clickable button

Text Fields

The `<input type="text">` defines a single-line input field for text input.

```
<form>
```

```
  <label for="fname">First name:</label><br>
```

```
  <input type="text" id="fname" name="fname"><br>
```

```
  <label for="lname">Last name:</label><br>
```

```
  <input type="text" id="lname" name="lname">
```

```
</form>
```

The `<label>` Element

Notice the use of the `<label>` element in the example above.

The `<label>` tag defines a label for many form elements.

The `<label>` element is useful for screen-reader users, because the screen-reader will read out loud the label when the user focus on the input element.

The `<label>` element also help users who have difficulty clicking on very small regions (such as radio buttons or checkboxes) - because when the user clicks the text within the `<label>` element, it toggles the radio button/checkbox.

The `for` attribute of the `<label>` tag should be equal to the `id` attribute of the `<input>` element to bind them together.

Radio Buttons

The `<input type="radio">` defines a radio button.

Radio buttons let a user select ONE of a limited number of choices.

`<p>Choose your favorite Web language:</p>`

`<form>`

`<input type="radio" id="html" name="fav_language" value="HTML">`

`<label for="html">HTML</label>
`

`<input type="radio" id="css" name="fav_language" value="CSS">`

`<label for="css">CSS</label>
`

`<input type="radio" id="javascript" name="fav_language" value="JavaScript">`

`<label for="javascript">JavaScript</label>`

`</form>`

This is how the HTML code above will be displayed in a browser:

Choose your favorite Web language:

- HTML
- CSS
- JavaScript

Checkboxes

The `<input type="checkbox">` defines a checkbox.

Checkboxes let a user select ZERO or MORE options of a limited number of choices.

```
<form>
```

```
  <input type="checkbox" id="vehicle1" name="vehicle1" value="Bike">
```

```
  <label for="vehicle1"> I have a bike</label><br>
```

```
  <input type="checkbox" id="vehicle2" name="vehicle2" value="Car">
```

```
  <label for="vehicle2"> I have a car</label><br>
```

```
  <input type="checkbox" id="vehicle3" name="vehicle3" value="Boat">
```

```
  <label for="vehicle3"> I have a boat</label>
```

```
</form>
```

This is how the HTML code above will be displayed in a browser:

- I have a bike
- I have a car
- I have a boat

The Submit Button

The `<input type="submit">` defines a button for submitting the form data to a form-handler. The form-handler is typically a file on the server with a script for processing input data. The form-handler is specified in the form's action attribute.

```
<form action="/action_page.php">  
  <label for="fname">First name:</label><br>  
  <input type="text" id="fname" name="fname" value="John"><br>  
  <label for="lname">Last name:</label><br>  
  <input type="text" id="lname" name="lname" value="Doe"><br><br>  
  <input type="submit" value="Submit">  
</form>
```

This is how the HTML code above will be displayed in a browser:

First name:

Last name:

The Name Attribute for <input>

Notice that each input field must have a name attribute to be submitted.
If the name attribute is omitted, the value of the input field will not be sent at all.

```
<form action="/action_page.php">  
  <label for="fname">First name:</label><br>  
  <input type="text" id="fname" value="John"><br><br>  
  <input type="submit" value="Submit">  
</form>
```

Result Size: 744 x 445 [Get your own website](#)

The name Attribute

First name:

If you click the "Submit" button, the form-data will be sent to a page called "/action_page.php".

Notice that the value of the "First name" field will not be submitted, because the input element does not have a name attribute.

How to Make a Responsive Registration Form in HTML and CSS

The following HTML5 input types in this simple HTML CSS project.

Input type text

Input type email

HTML5 input type radio

HTML5 input type phone

For file upload, HTML input type file

How to create a simple registration form using HTML and CSS

How to Make a Responsive Registration Form in HTML and CSS

```
<!DOCTYPE html>
<html lang="en">
<head>
  <meta charset="UTF-8">
  <meta http-equiv="X-UA-Compatible" content="IE=edge">
  <meta name="viewport" content="width=device-width, initial-scale=1.0">
  <title>Document</title>
  <link rel="stylesheet" href="form.css">
  <link rel="stylesheet" href="https://cdn.tutorialjinni.com/intl-tel-input/17.0.8/css/intlTelInput.css"/>
  <script src="https://cdn.tutorialjinni.com/intl-tel-input/17.0.8/js/intlTelInput.min.js"></script>
</head>
```

```
<body>
  <div class="container">
    <form id="contact" action="" method="post">
      <h1>Registration Form</h1>
      <h3>Fill the form below and press the submit button!</h3>
      <div class="row">
        <!-- first column -->
        <div class="column">
          <fieldset>
            <input type="text" placeholder="Full Name *" name="name" required autofocus>
          </fieldset>
          <fieldset>
            <input type="text" placeholder="Father name *" name="fname" required autofocus>
          </fieldset>
          <fieldset>
            <input type="email" placeholder="Your email *" name="email" required autofocus>
          </fieldset>
          <fieldset>
            <input type="text" placeholder="Date of birth *" name="date" onfocus="(this.type = 'date')" required autofocus>
          </fieldset>
          <!-- adding all country code list -->
          <fieldset>
            <input type="text" placeholder="Phone number *" name="phone" id="phone" required autofocus>
          </fieldset>
        </div>
      </div>
    </form>
  </div>
</body>
```

```
<!-- second column -->
  <div class="column">
    <fieldset>
      <p>What is your gender?</p>
      <div class="radio">
        <input type="radio" id="male" name="gender" required>
        <label for="male">Male</label>
      </div>
      <div class="radio">
        <input type="radio" id="female" name="gender" required>
        <label for="female">Female</label>
      </div>
    </fieldset>
  </div>
```

```
<fieldset>
```

```
  <label for="idCard">Enter your ID Card in given formate.</label>
```

```
  <div class="idCard">
```

```
    <input type="text" name="idCard" pattern="[0-9]{5}" placeholder="#####" maxlength="5"> _
```

```
    <input type="text" name="idCard" pattern="[0-9]{7}" placeholder="#####_" maxlength="7"> _
```

```
    <input type="text" name="idCard" pattern="[0-9]{1}" placeholder="#" maxlength="1">
```

```
  </div>
```

```
</fieldset>
```

```
<fieldset>
```

```
  <p>Upload File</p>
```

```
  <input type="file" id="file" required>
```

```
</fieldset>
```

```
</div>
```

```
</div>
```

```
<!-- submit button -->
  <fieldset>
    <button type="submit" id="button">Submit Now</button>
  </fieldset>
</form>
</div>
```

```
<!-- Javascript to initialize the code list -->
<script>
var input = document.querySelector("#phone");
window.intlTelInput(input, {
  separateDialCode: true
});
</script>
</body>
</html>
```

How to create a dropdown country phone code list in HTML

The easiest way to create the dropdown country phone code list in HTML, paste the following CDN code links inside the **<head>** section of the HTML code.

```
<link rel="stylesheet" href="https://cdn.tutorialjinni.com/intl-tel-input/17.0.8/css/intlTelInput.css"/>
```

```
<script src="https://cdn.tutorialjinni.com/intl-tel-input/17.0.8/js/intlTelInput.min.js"></script>
```

After that, add the following HTML input field with input type text and ***id = phone*** inside the body tag of HTML.

```
<input type="text" placeholder="Phone number *" name="phone" id="phone" required autofocus>
```



CSS Source Code:

```
/* import google font family */
@import url('https://fonts.googleapis.com/css2?family=Open+Sans:ital,wght@0,600;1,600&display=swap');
/* selecting everything */
* {
padding: 0;
margin: 0;
box-sizing: border-box;
}
body {
font-family: 'Open Sans', sans-serif, helvetica, Arial;
font-weight: 400;
font-size: 14px;
color: black;
/* body background image */
background-image: linear-gradient(to bottom, rgba(128, 128, 128, 0.541), rgba(204, 0, 255, 0.637)), url(image.jpg);
background-attachment: fixed;
background-size: cover;
}
```

CSS Source Code:

```
container {
  max-width: 800px;
  width: 100%;
  margin: 0 auto;
}
#contact {
  background-color: rgba(220, 255, 66, 0.7);
  padding: 20px;
  margin: 50px 0;
}
#contact input, button {
  font: 400 15px 'Open Sans', sans-serif, helvetica, Arial;
}
#contact h1 {
  font-size: 35px;
  font-weight: bold;
  text-align: center;
  color: blue;
}
```

CSS Source Code:

```
#contact h3 {  
  margin: 5px 0px 15px;  
  text-align: center;  
}  
.row {  
  display: flex;  
  width: 100% !important;  
  padding: 20px 0px;  
}  
.row .column {  
  margin: 0px 20px;  
  width: 50%;  
}  
fieldset {  
  border: medium none !important;  
  margin: 0 0 10px;  
  min-width: 100%;  
  width: 100%;  
}
```

CSS Source Code:

```
#contact input {
  width: 100%;
  border: 1px solid rgb(150, 150, 150);
  background-color: white;
  padding: 10px;
  margin: 5px 0;
}
input[type = "radio"] {
  width: 10% !important;
}
#contact .row .radio {
  border: 1px solid rgb(150, 150, 150);
  background-color: white;
  margin: 7px 0 10px;
  padding: 5px;
}
#contact .row .idCard{
  display: flex;
  height: 45px !important;
  margin: 5px 0;
}
```

CSS Source Code:

```
#contact .row .idCard :first-child {  
  width: 80px;  
}  
#contact .row .idCard :last-child {  
  width: 40px;  
}  
#contact .row #phone {  
  max-width: 100% !important;  
  padding-right: 80px;  
}  
#contact input:hover {  
  transition: border-color 0.3s ease-in-out;  
  border: 1px solid rgb(68, 68, 68);  
}
```

CSS Source Code:

```
#contact button {  
  outline: none;  
  border: none;  
  background-color: blue;  
  color: white;  
  margin: 0 0 5px 40%;  
  padding: 10px;  
  font-size: 17px;  
  width: 150px;  
}
```

```
#contact button:hover {  
  background-color: rgba(0, 0, 255, 0.8);  
}
```

```
#contact input:focus {  
  outline: 0;  
  border: 1px solid red;  
}
```

CSS Source Code:

```
/* mobile responsive mode */  
@media screen and (max-width: 580px) {  
  .row {  
    flex-direction: column;  
  }  
  .row .column {  
    width: 90% !important;  
  }  
  #contact .row #phone {  
    padding-right: 180px;  
  }  
}
```

Responsive registration form using HTML and CSS

Registration Form

Complete the form below and press the submit button!

<input type="text" value="Full name *"/>	What is your gender? <input type="radio"/> Male
<input type="text" value="Father Name *"/>	<input type="radio"/> Female
<input type="text" value="Your Email Address *"/>	Enter ID Card number in given formate. ##### - ##### - #
<input type="text" value="Date of birth *"/>	Upload file Choose File No file chosen
<input type="text" value="+1 * Phone number *"/>	

Submit Now

Registration Form

Complete the form below and press the submit button!

<input type="text" value="Full name *"/>
<input type="text" value="Father Name *"/>
<input type="text" value="Your Email Address *"/>
<input type="text" value="Date of birth *"/>
<input type="text" value="+1 * Phone number *"/>
What is your gender? <input type="radio"/> Male
<input type="radio"/> Female
Enter ID Card number in given formate. ##### - ##### - #
Upload file Choose File No file chosen

Submit Now

- References

[HTTPS://WWW.DOTNETTRICKS.COM/LEARN/HTML/HTML5-NEW-ELEMENTS-TAGS](https://www.dotnettricks.com/learn/html/html5-new-elements-tags)

[HTTPS://WWW.W3SCHOOLS.COM/TAGS](https://www.w3schools.com/tags)

[HTTPS://WWW.JAVATPOINT.COM/HTML-TAGS](https://www.javatpoint.com/html-tags)

[HTTPS://WWW.HMABLOGS.COM/HOW-TO-MAKE-A-RESPONSIVE-REGISTRATION-FORM-IN-HTML-AND-CSS/](https://www.hmablogs.com/how-to-make-a-responsive-registration-form-in-html-and-css/)

[HTTPS://WWW.JAVATPOINT.COM/HTML-REGISTRATION-FORM](https://www.javatpoint.com/html-registration-form)

[HTTPS://WWW.W3SCHOOLS.COM/HTML/HTML_FORMS.ASP](https://www.w3schools.com/html/html_forms.asp)

[HTTPS://WWW.TUTORIALSPPOINT.COM/HTML/HTML_FORM_TAG.HTM](https://www.tutorialspoint.com/html/html_form_tag.htm)

[HTTPS://WWW.SIMPLILEARN.COM/TUTORIALS/HTML-TUTORIAL/HTML-FORM-TAG](https://www.simplilearn.com/tutorials/html-tutorial/html-form-tag)

Thank You!