ASSIGMENT ICT

NAME: **FAIZULLAH KHAN**

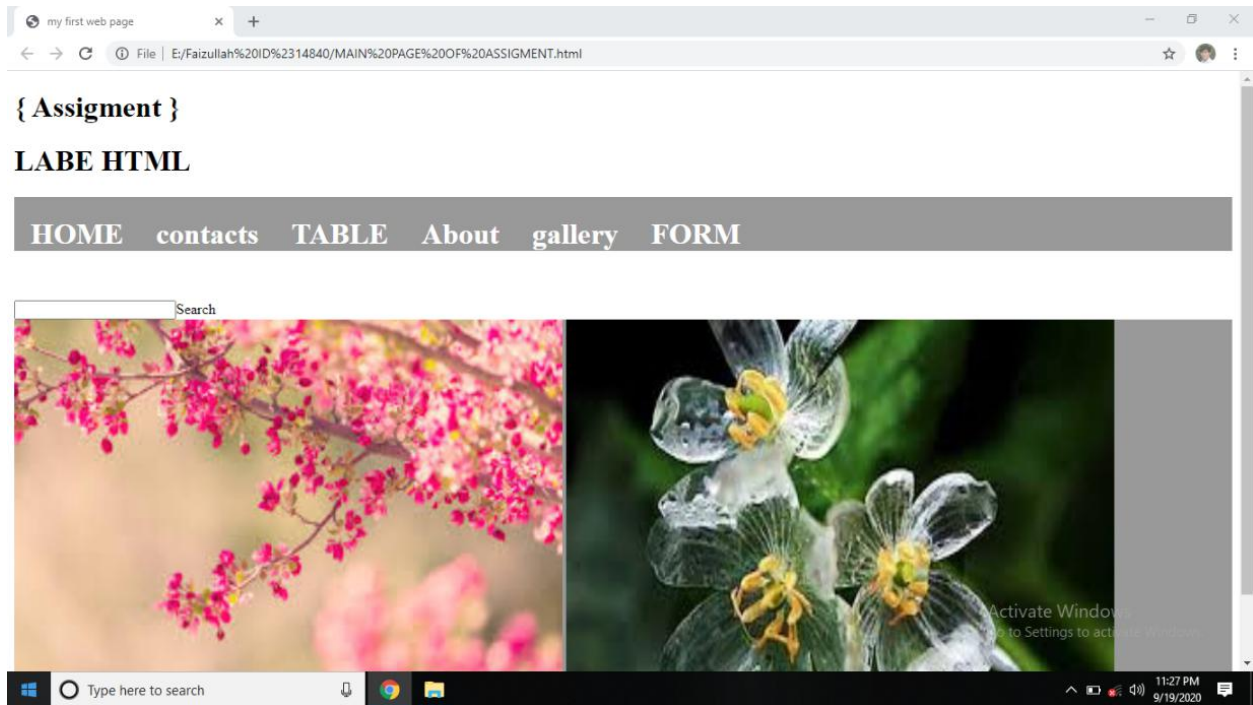**ID:**   **14840**

Section: **B**
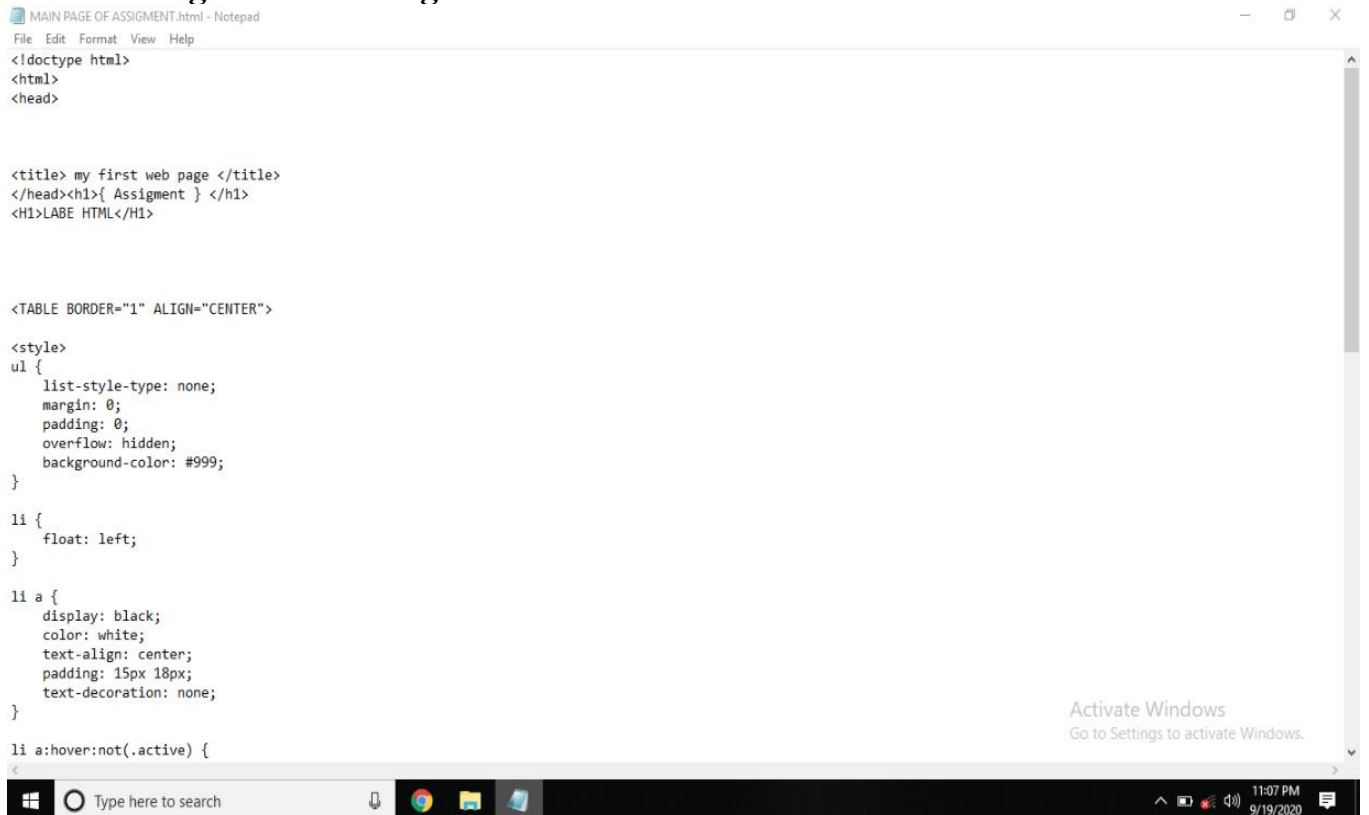
DEPARTMENT: **BS (SE)**

SUMITTED: **Dr.Atif Ishtiq**

DATED: 21/09/2020.

HOME:

{ Assigment }

LABE HTML

HOME   contacts   TABLE   About   gallery   FORM

Search

Home background coading:

MAIN PAGE OF ASSIGMENT.html - Notepad   —   ⬜   ✕

File   Edit   Format   View   Help

```
<!doctype html>
<html>
<head>


<title> my first web page </title>
</head><h1>{ Assigment } </h1>
<H1>LABE HTML</H1>



<TABLE BORDER="1" ALIGN="CENTER">

<style>
ul {
    list-style-type: none;
    margin: 0;
    padding: 0;
    overflow: hidden;
    background-color: #999;
}

li {
    float: left;
}

li a {
    display: black;
    color: white;
    text-align: center;
    padding: 15px 18px;
    text-decoration: none;
}

li a:hover:not(.active) {
```

```
        padding: 15px 18px;
        text-decoration: none;
}

li a:hover:not(.active) {
        background-color: black;
}

.active {
        background-color: black;
}
</style>
</head>



<ul><h1>
<li><a href="ID#14840.html"#news">HOME</a></li>

   <li><a href="indus3.html"#news">contacts</a></li>
   <li><a href="INDUS.html"#contact">TABLE</a></li>
   <li><a href="3rd.html"#about">About</a></li>
   <li><a href="2nd.html"#news">gallery</a></li></h1>
 <H1><li><a href="4TH.html"#news">FORM</a></li></h1>
</ul>
<br><br><br>

<input type="search" id="site-search" name="q"
        aria-label="Search through site content"

<button>Search</button></br>


 <ul>

   <li>  <img src="a9.jpg" alt="a9" width="600" height="450">
            <img src="a10.jpg" alt="a10" width="600" height="450">
```

Activate Windows
Go to Settings to activate Windows.

```
   <li><a href="indus3.html"#news">contacts</a></li>
   <li><a href="INDUS.html"#contact">TABLE</a></li>
   <li><a href="3rd.html"#about">About</a></li>
   <li><a href="2nd.html"#news">gallery</a></li></h1>
 <H1><li><a href="4TH.html"#news">FORM</a></li></h1>
</ul>
<br><br><br>

<input type="search" id="site-search" name="q"
        aria-label="Search through site content"

<button>Search</button></br>


 <ul>

   <li>  <img src="a9.jpg" alt="a9" width="600" height="450">
            <img src="a10.jpg" alt="a10" width="600" height="450">
        </li> </ul>
</body>


</body>




</table>
</form>



</html>
```
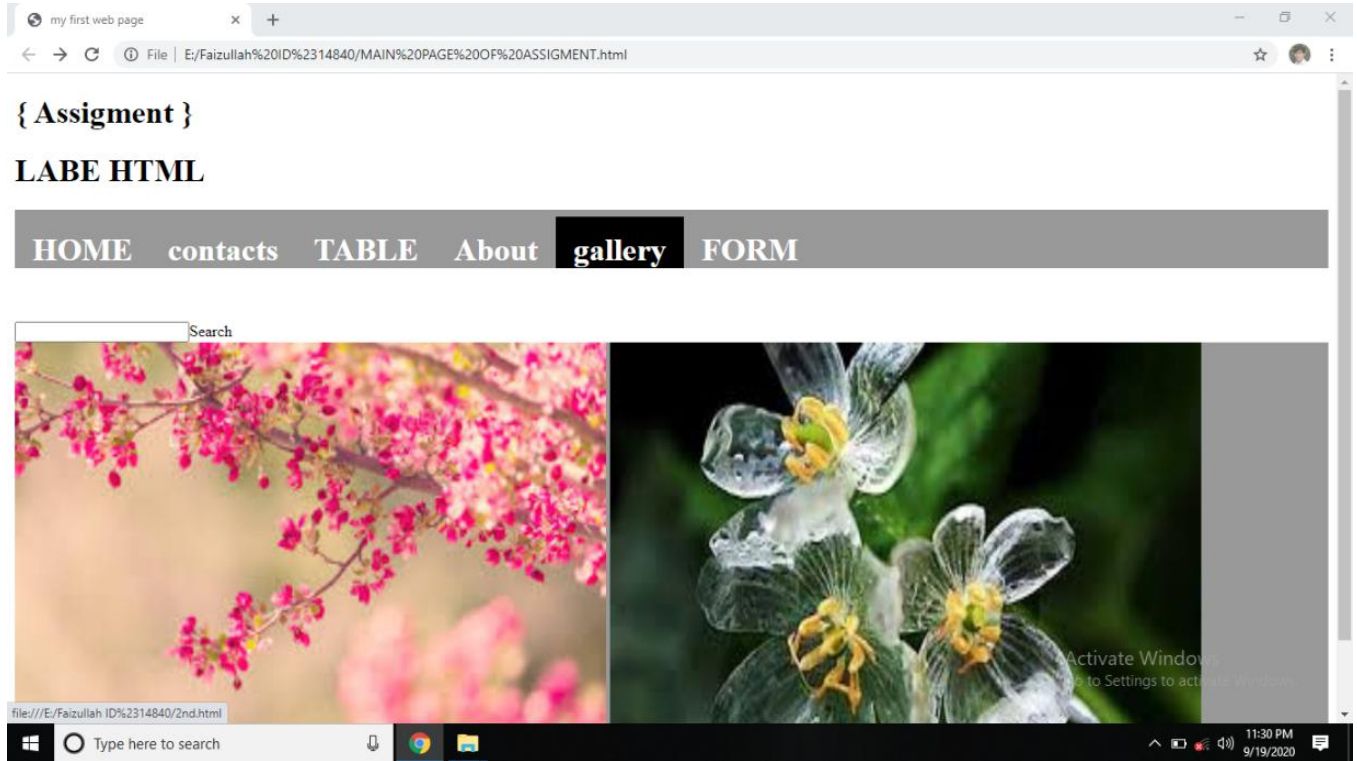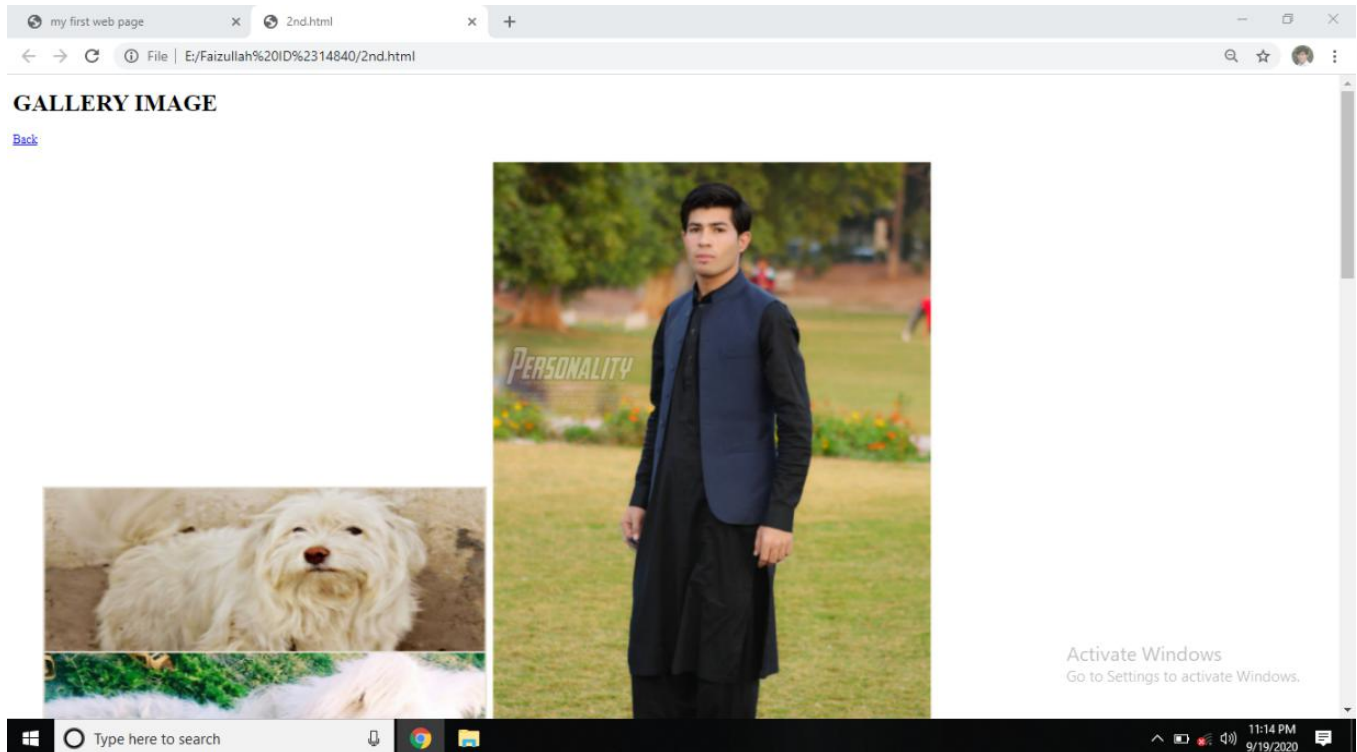
Activate Windows
Go to Settings to activate Windows.

ENTRR TO GALLERY:

OUTPUT OF GALLRRY:

GALLERY COADING:

```
2nd.html - Notepad                                                    —  □  ×
File  Edit  Format  View  Help
<!doctype html>
<head><h1>GALLERY IMAGE</H1><head>


<body>
<div><a href="javascript:history.go(-1)"onMouseOver="self.stutua.referrer:return true"> Back </a></div>

<ul>
    <li>  <img src="a1.jpg" alt="a1" width="600" height="450">
            <img src="a2.jpg" alt="a2" width="600" heig"45ht="450">
        </li>


    <li> <img src="a3.jpg" alt="a3" width="600" height="450">
            <img src="a4.jpg" alt="a4" width="600" height="450">
        </li>


    <li> <img src="a5.jpg" alt="a5" width="600" height="450">
            <img src="a6.jpg" alt="a6" width="600" height="450">
        </li>


    <li> <img src="a7.jpg" alt="a7" width="600" height="450">
            <img src="a8.jpg" alt="a8" width="600" height="450">
        </li>



    <li>  <img src="a9.jpg" alt="a9" width="600" height="450">
            <img src="a10.jpg" alt="a10" width="600" height="450">
        </li> </ul>

</body>
</HTML>
```
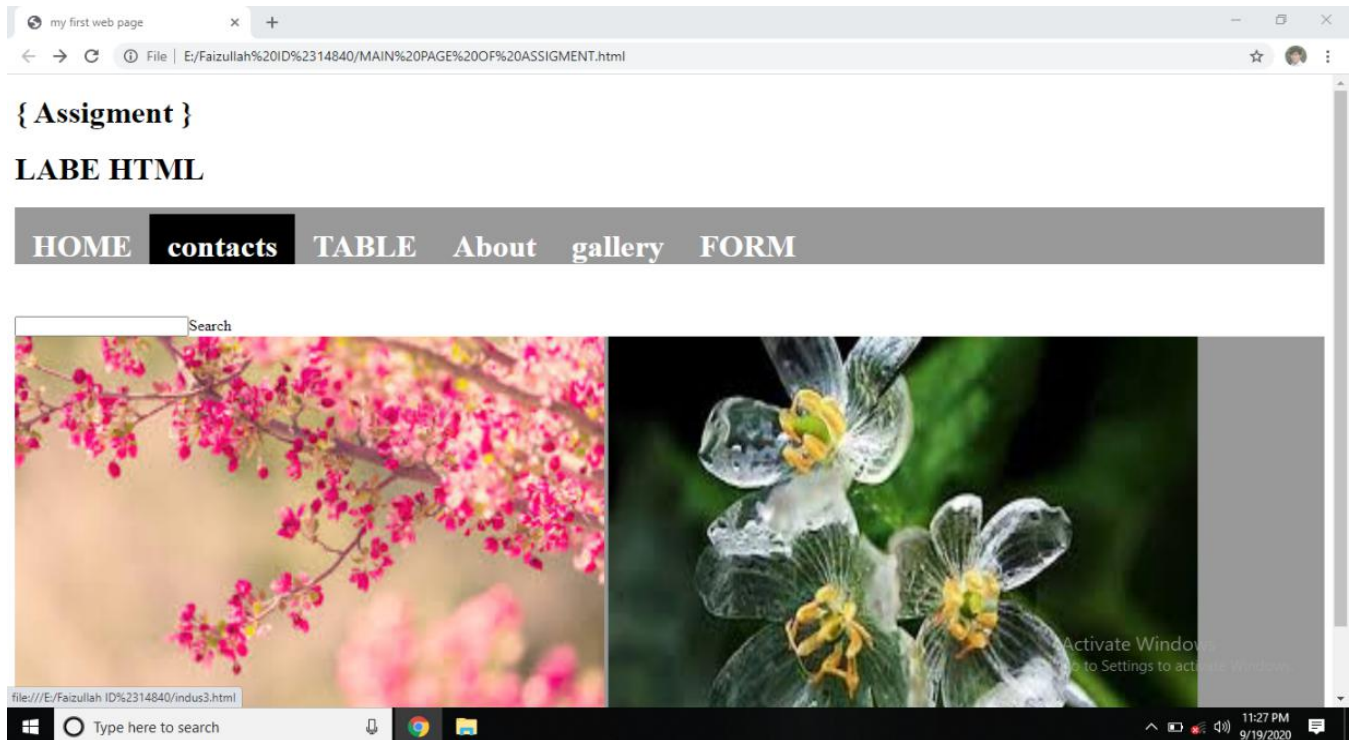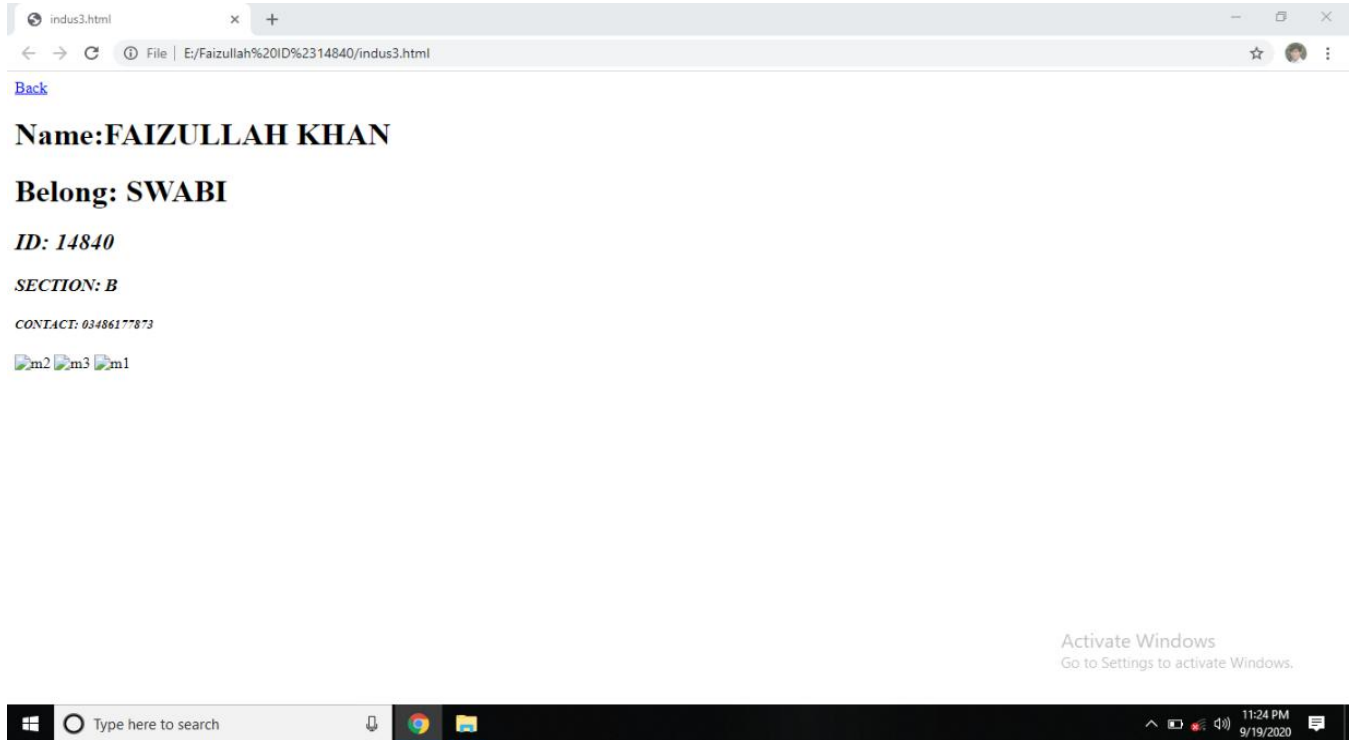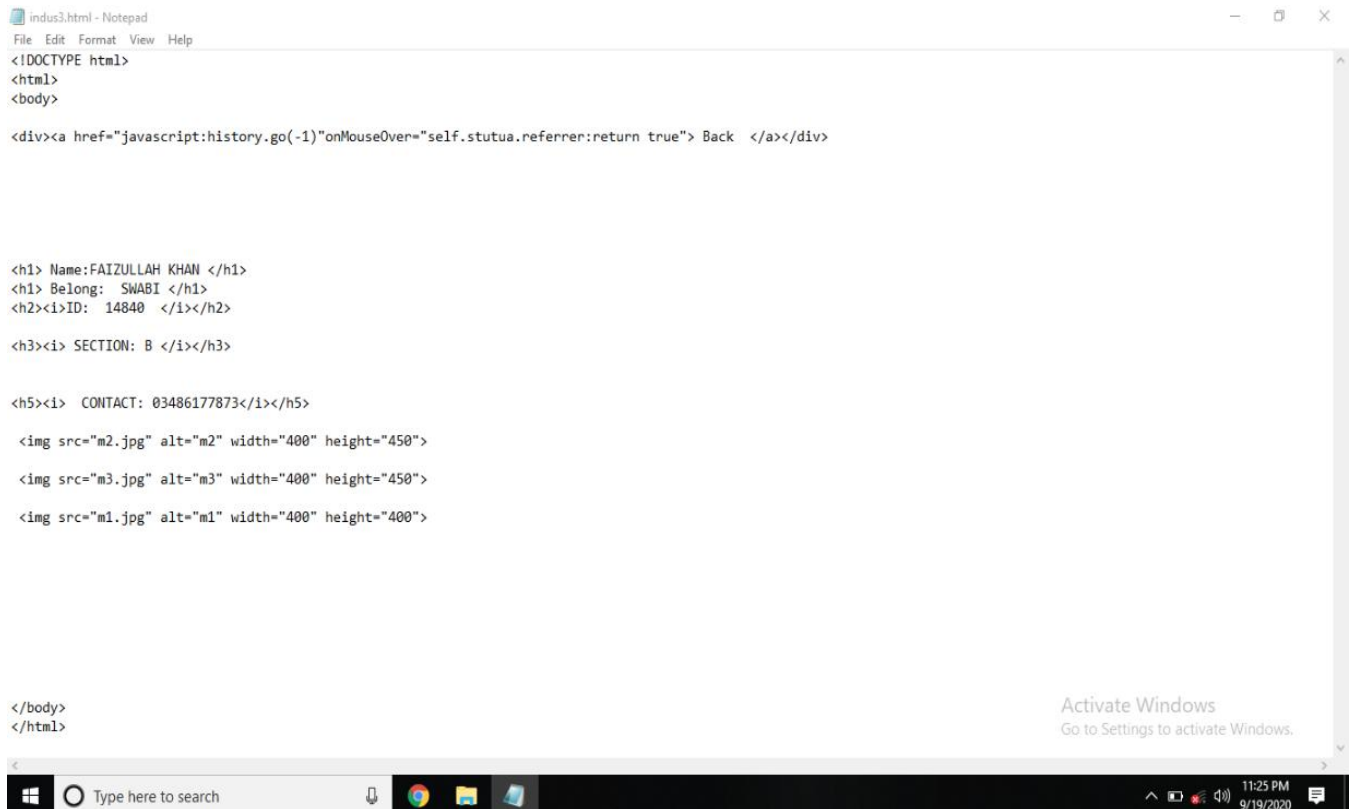
ENTER TO CONTACT:

OUTPUT:

COADING:

```html
<!DOCTYPE html>
<html>
<body>

<div><a href="javascript:history.go(-1)"onMouseOver="self.stutua.referrer:return true"> Back  </a></div>




<h1> Name:FAIZULLAH KHAN </h1>
<h1> Belong:  SWABI </h1>
<h2><i>ID:  14840  </i></h2>

<h3><i> SECTION: B </i></h3>


<h5><i>  CONTACT: 03486177873</i></h5>

 <img src="m2.jpg" alt="m2" width="400" height="450">

 <img src="m3.jpg" alt="m3" width="400" height="450">

 <img src="m1.jpg" alt="m1" width="400" height="400">




</body>
</html>
```

ENTER TO FORM:

OUTPUT:

COADING:

```html
<html>
<head>
<title>Student Registration Form</title>

</head>
 <style type="text/css">
        h3{
  font-family: Calibri;
  font-size: 25pt;
  font-style: normal;
  font-weight: bold;
  color:Slate black;
  text-align: center;
  text-decoration: underline
}

table{
  font-family: Calibri;
  color:white;
  font-size: 11pt;
  font-style: normal;
  font-weight: bold;
  text-align:;
  background-color: #597D35;
  border-collapse: ollapse;
  border: 2px solid navy
}
table.inner{
  border: 0px
}
 </style>
<body>
<h3> IQRA UNIVERSITY REGISTRATION FORM</h3>


<table align="center" cellpadding = "10">
```

```html
<!----- First Name --------------------------------------------------->
<tr>
<td>FIRST NAME</td>
<td><input type="text" name="First_Name" maxlength="30"/>
(max 30 characters a-z and A-Z)
</td>
</tr>

<!----- Last Name --------------------------------------------------->
<tr>
<td>LAST NAME</td>
<td><input type="text" name="Last_Name" maxlength="30"/>
(max 30 characters a-z and A-Z)
</td>
</tr>

<!----- Date Of Birth --------------------------------------------------->
<tr>
<td>DATE OF BIRTH</td>

<td>
<select name="Birthday_day" id="Birthday_Day">
<option value="-1">Day:</option>
<option value="1">1</option>
<option value="2">2</option>
<option value="3">3</option>

<option value="4">4</option>
<option value="5">5</option>
<option value="6">6</option>
<option value="7">7</option>
<option value="8">8</option>
<option value="9">9</option>
<option value="10">10</option>
<option value="11">11</option>
<option value="12">12</option>
```

```
<option value="13">13</option>
<option value="14">14</option>
<option value="15">15</option>
<option value="16">16</option>
<option value="17">17</option>
<option value="18">18</option>
<option value="19">19</option>
<option value="20">20</option>
<option value="21">21</option>

<option value="22">22</option>
<option value="23">23</option>
<option value="24">24</option>
<option value="25">25</option>
<option value="26">26</option>
<option value="27">27</option>
<option value="28">28</option>
<option value="29">29</option>
<option value="30">30</option>

<option value="31">31</option>
</select>

<select id="Birthday_Month" name="Birthday_Month">
<option value="-1">Month:</option>
<option value="January">Jan</option>
<option value="February">Feb</option>
<option value="March">Mar</option>
<option value="April">Apr</option>
<option value="May">May</option>
<option value="June">Jun</option>
<option value="July">Jul</option>
<option value="August">Aug</option>
<option value="September">Sep</option>
<option value="October">Oct</option>
<option value="November">Nov</option>
<option value="December">Dec</option>
```

```
<select name="Birthday_Year" id="Birthday_Year">

<option value="-1">Year:</option>
<option value="2012">2012</option>
<option value="2011">2011</option>
<option value="2010">2010</option>
<option value="2009">2009</option>
<option value="2008">2008</option>
<option value="2007">2007</option>
<option value="2006">2006</option>
<option value="2005">2005</option>
<option value="2004">2004</option>
<option value="2003">2003</option>
<option value="2002">2002</option>
<option value="2001">2001</option>
<option value="2000">2000</option>

<option value="1999">1999</option>
<option value="1998">1998</option>
<option value="1997">1997</option>
<option value="1996">1996</option>
<option value="1995">1995</option>
<option value="1994">1994</option>
<option value="1993">1993</option>
<option value="1992">1992</option>
<option value="1991">1991</option>
<option value="1990">1990</option>

<option value="1989">1989</option>
<option value="1988">1988</option>
<option value="1987">1987</option>
<option value="1986">1986</option>
<option value="1985">1985</option>
<option value="1984">1984</option>
<option value="1983">1983</option>
<option value="1982">1982</option>
<option value="1981">1981</option>
```

```html
<option value="1980">1980</option>
</select>
</td>
</tr>

<!----- Email Id ------------------------------------------------------>
<tr>
<td>EMAIL ID</td>
<td><input type="text" name="Email_Id" maxlength="100" /></td>
</tr>

<!----- Mobile Number ------------------------------------------------------>
<tr>
<td>MOBILE NUMBER</td>
<td>
<input type="text" name="Mobile_Number" maxlength="10" />
(10 digit number)
</td>
</tr>

<!----- Gender ------------------------------------------------------>
<tr>
<td>GENDER</td>
<td>
Male <input type="radio" name="Gender" value="Male" />
Female <input type="radio" name="Gender" value="Female" />
</td>
</tr>

<!----- Address ------------------------------------------------------>
<tr>
<td>ADDRESS <br /><br /><br /></td>
<td><textarea name="Address" rows="4" cols="30"></textarea></td>
</tr>

<!----- City ------------------------------------------------------>
<tr>
```

```html
</tr>

<!----- State ------------------------------------------------------>
<tr>
<td>STATE</td>
<td><input type="text" name="State" maxlength="30" />
(max 30 characters a-z and A-Z)
</td>
</tr>

<!----- Country ------------------------------------------------------>
<tr>
<td> pakistan </td>
<td><input type="text" name="Country" value="+92" readonly="readonly" /></td>
</tr>

<!----- Hobbies ------------------------------------------------------>

<tr>
<td>HOBBIES <br /><br /><br /></td>

<td>
Drawing
<input type="checkbox" name="Hobby_Drawing" value="Drawing" />
Singing
<input type="checkbox" name="Hobby_Singing" value="Singing" />
Dancing
<input type="checkbox" name="Hobby_Dancing" value="Dancing" />
Sketching
<input type="checkbox" name="Hobby_Cooking" value="Cooking" />
<br />
Others
<input type="checkbox" name="Hobby_Other" value="Other">
<input type="text" name="Other_Hobby" maxlength="30" />
</td>
</tr>
```

```
</tr>

<!----- State --------------------------------------------------------->
<tr>
<td>STATE</td>
<td><input type="text" name="State" maxlength="30" />
(max 30 characters a-z and A-Z)
</td>
</tr>

<!----- Country ------------------------------------------------------->
<tr>
<td> pakistan </td>
<td><input type="text" name="Country" value="+92" readonly="readonly" /></td>
</tr>

<!----- Hobbies -------------------------------------------------------->

<tr>
<td>HOBBIES <br /><br /><br /></td>

<td>
Drawing
<input type="checkbox" name="Hobby_Drawing" value="Drawing" />
Singing
<input type="checkbox" name="Hobby_Singing" value="Singing" />
Dancing
<input type="checkbox" name="Hobby_Dancing" value="Dancing" />
Sketching
<input type="checkbox" name="Hobby_Cooking" value="Cooking" />
<br />
Others
<input type="checkbox" name="Hobby_Other" value="Other">
<input type="text" name="Other_Hobby" maxlength="30" />
</td>
</tr>
```

```
<!----- Qualification-------------------------------------------------->
<tr>
<td>QUALIFICATION <br /><br /><br /><br /><br /><br /><br /></td>

<td>
<table>

<tr>
<td align="center"><b>Sl.No.</b></td>
<td align="center"><b>Examination</b></td>
<td align="center"><b>Board</b></td>
<td align="center"><b>Percentage</b></td>
<td align="center"><b>Year of Passing</b></td>
</tr>

<tr>
<td>1</td>
<td>Class X</td>
<td><input type="text" name="ClassX_Board" maxlength="30" /></td>
<td><input type="text" name="ClassX_Percentage" maxlength="30" /></td>
<td><input type="text" name="ClassX_YrOfPassing" maxlength="30" /></td>
</tr>

<tr>
<td>2</td>
<td>Class XII</td>
<td><input type="text" name="ClassXII_Board" maxlength="30" /></td>
<td><input type="text" name="ClassXII_Percentage" maxlength="30" /></td>
<td><input type="text" name="ClassXII_YrOfPassing" maxlength="30" /></td>
</tr>

<tr>
<td>3</td>
<td>Graduation</td>
<td><input type="text" name="Graduation_Board" maxlength="30" /></td>
<td><input type="text" name="Graduation_Percentage" maxlength="30" /></td>
<td><input type="text" name="Graduation_YrOfPassing" maxlength="30" /></td>
```

```
<td></td>
<td align="center">(10 char max)</td>
<td align="center">(upto 2 decimal)</td>
</tr>
</table>

</td>
</tr>

<!----- Course -------------------------------------------------------->
<tr>
<td>COURSES<br />APPLIED FOR</td>
<td>
BCA
<input type="radio" name="Course_BCA" value="BCA">
B.Com
<input type="radio" name="Course_BCom" value="B.Com">
B.Sc
<input type="radio" name="Course_BSc" value="B.Sc">
B.A
<input type="radio" name="Course_BA" value="B.A">
</td>
</tr>

<!----- Submit and Reset ------------------------------------------------>
<tr>
<td colspan="2" align="center">
<input type="submit" value="Submit">
<input type="reset" value="Reset">
</td>
</tr>
</table>

</form>

</body>
</html>
```
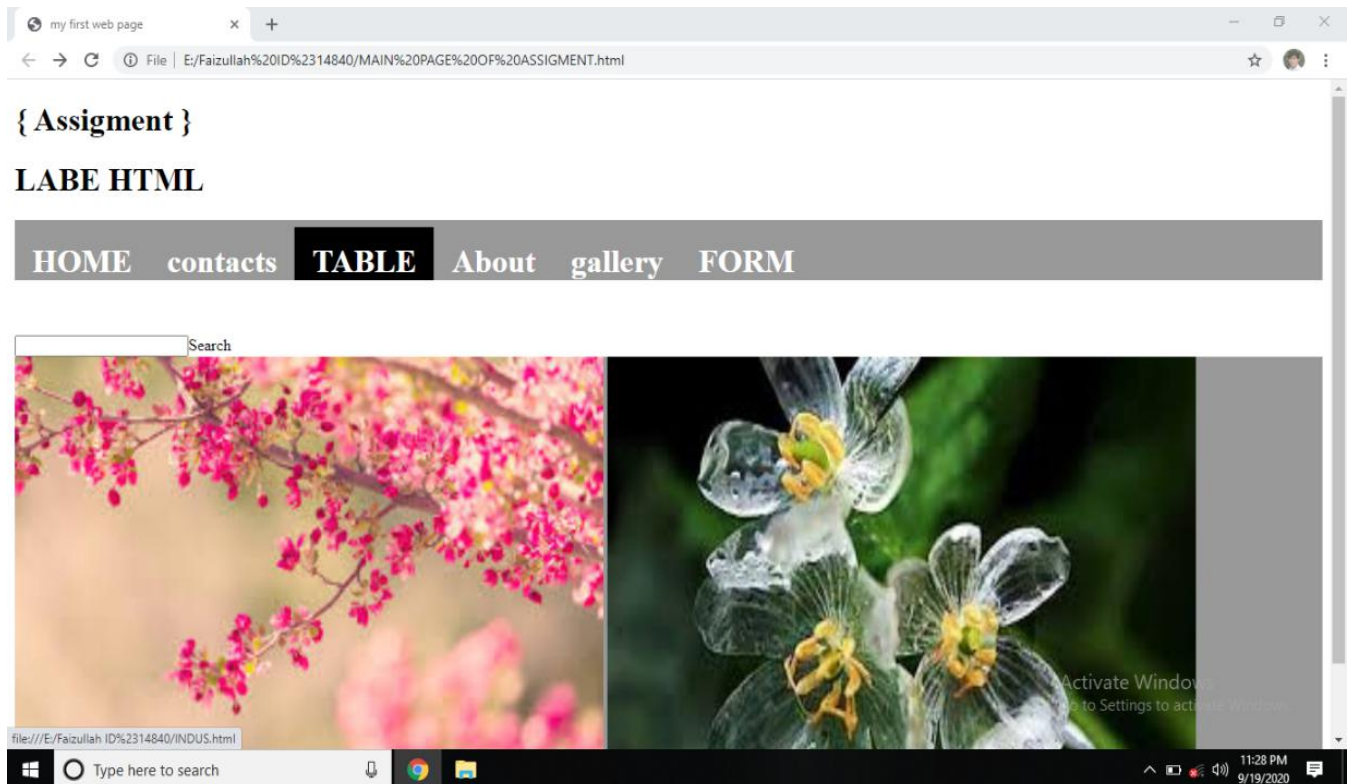
Type here to search

6:59 PM
9/28/2020

TABLE:

{ Assigment }

LABE HTML

HOME   contacts   TABLE   About   gallery   FORM

Search

file:///E:/Faizullah ID%2314840/INDUS.html

Type here to search

11:28 PM
9/19/2020

OUTPUT:

COADING:
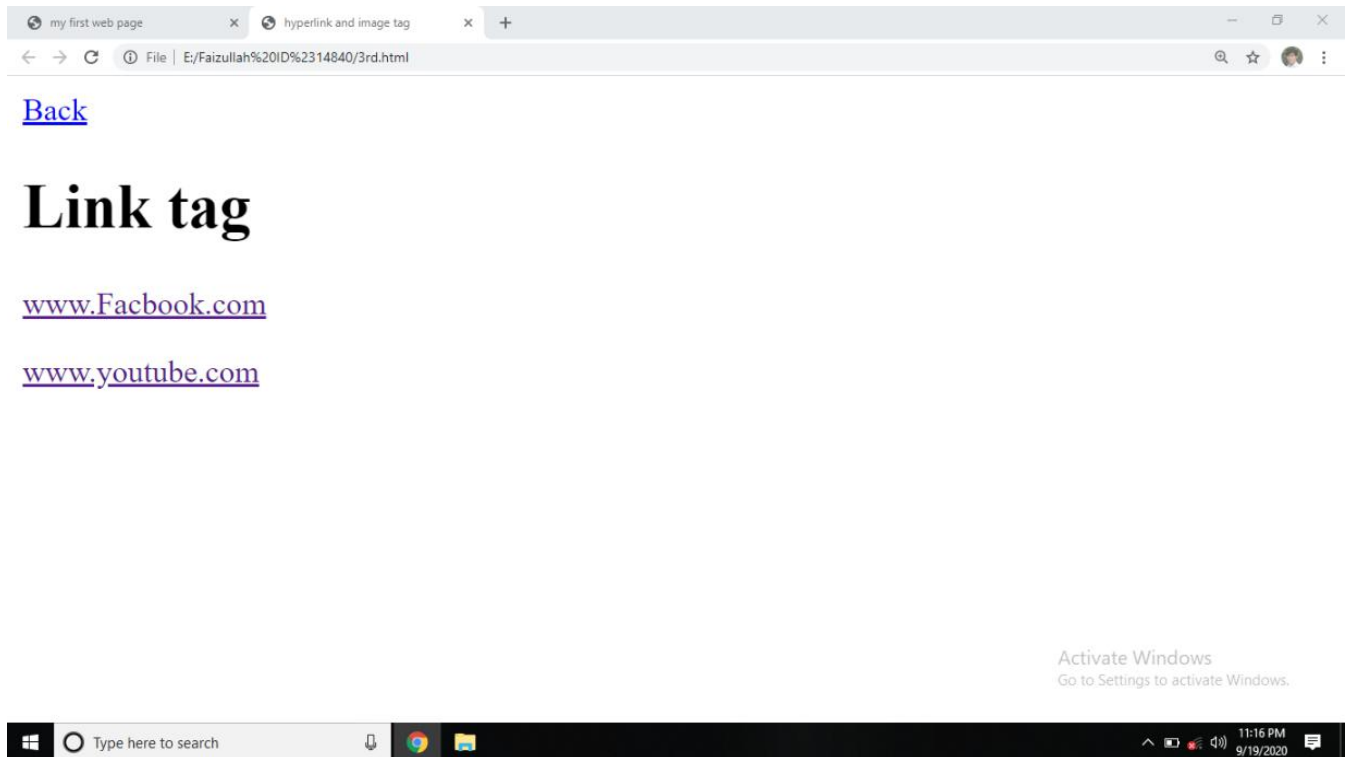

```
<!DOCTYPE TYPE>
<HTML>
<TABLE>

<HEAD><H1>TABLE</H1></HEAD><br>
  <body>

<div><a href="javascript:history.go(-1)"onMouseOver="self.stutua.referrer:return true"> Back </a></div>

</br>

<TABLE BORDER="2"WIDTH="350">
<BR />
<BR /><BR />
<TR>

 <TD><H1>NAME</H1></TD>
 <TD>FAIZULLAH KHAN </TD>
 <TD>SARDCHEENA </TD>
 <TD>SWABI </TD>

</TR>


<TR>

 <TD><H1>FATHER NAME</H1></TD>
 <TD>FAZAL HUSSAIN KHAN </TD>
 <TD>SARDCHEENA</TD>
 <TD>SWABI</TD>

</TR>


<TR>

 <TD><H1>department</H1></TD>
```
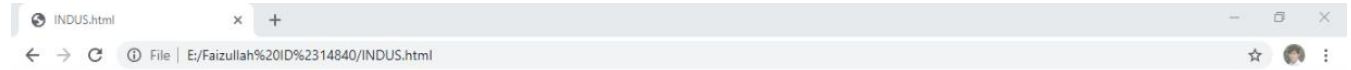
```
 <TD>SWABI</TD>

</TR>


<TR>

 <TD><H1>department</H1></TD>
 <TD>SOFTWARE ENG </TD>
 <TD> HTML  </TD>
 <TD>LABE </TD>

</TR>


<TR>

 <TD><H1>ID</H1></TD>
 <TD>  14840  </TD>
 <TD>STUDENT </TD>
 <TD>ABC</TD>

</TR>

<TR>

 <TD><H1>CONTACT</H1></TD>
 <TD> 03431929636 </TD>
 <TD>PHONE</TD>
 <TD>03486177873</TD>

</TR>
</TABLE>
<TABLE>
</body>

</HTML>
```

Type here to search

11:24 PM
9/19/2020

LINK:

{ Assigment }

LABE HTML

| HOME | contacts | TABLE | About | gallery | FORM |

Search

file:///E:/Faizullah ID%2314840/3rd.html

Type here to search

11:30 PM
9/19/2020

OUTPUT:

COADING:

File Edit Format View Help

```
<!doctype html>
<html>

<body>

<div><a href="javascript:history.go(-1)"onMouseOver="self.stutua.referrer:return true"> Back </a></div>


<title> hyperlink and image tag </title>
<body> <h1>Link tag </h1>
<p> <a href="">www.Facbook.com</a> </p>
<p><a href="">www.youtube.com</a></p>
</body>
</title>
</body>
</html>
```

Type here to search

11:17 PM
9/19/2020

THE END