



CERTIFICATION OF COMPLETION OF MASTER'S DEGREE REQUIREMENTS

Name: <i>(last, first, M.I.)</i> Kaoru Seki	Campus ID: CQ93579
Type of Masters Degree: Masters of Science	Graduation Term and Year: Spring, 2025
Graduate Program: Human-Centered Computing	

This student has met all requirements of the Graduate School and the program for the degree, including *(please check all that apply)*:

Completed

☐

Course Work

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Thesis Defense

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Capstone Project

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Seminars and/or Research Papers

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Written Comprehensive Examination

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Portfolio

☐

Oral Comprehensive Examination

☐


Language Requirements

☐

Student has not completed degree requirements:
Please withdraw current diploma application.

APPROVAL SIGNATURES

Please type and sign

Advisor: Yasmine Kotturi	Signature: 	Date: 11/28/25
Graduate Program Director:	Signature:	Date: