APPLICATION CHECK LIST
GRADUATE CERTIFICATE IN CONFLICT RESOLUTION

The following documents must be submitted to the Graduate Admissions Office:

- Graduate Admissions Application
  [http://manoa.hawaii.edu/graduate/content/submitting-your-application](http://manoa.hawaii.edu/graduate/content/submitting-your-application)

- Official transcript for each post-secondary institution attended

- Application Fee
  OR

- Concurrent Graduate Program Application (If you are currently enrolled in another graduate program at UHM)
  [http://manoa.hawaii.edu/graduate/content/submitting-your-application](http://manoa.hawaii.edu/graduate/content/submitting-your-application)
  Transcripts are not necessary if you are in a graduate program

- Application Fee

The following documents must be submitted to the Matsunaga Institute for Peace and Conflict Resolution at:

Graduate Certificate Office
2424 Maile Way, Saunders Hall 523
Honolulu, HI 96822

- Completed Student Information Form (attached);

- A one page Statement of Interest, including conflict resolution experience and/or goals for participating in the certificate program;

- Two letters of recommendation
  It is preferred to have one professional letter from an employer, project supervisor, affiliate in an organization, or the like, and one academic letter from a faculty member or department head who is familiar with your record and can credibly comment on your ability and performance as a graduate student. Student referrals will not be accepted.

INTERNATIONAL STUDENTS: In addition to the above, the following documentation must be submitted to the Graduate Admissions Office:

- TOEFL Score. Minimal requirements are 600 (paper), 250 (computer) and 100 (internet);

- Verification of Financial Status.

3/16/2016
Graduate Certificate in Conflict Resolution
STUDENT INFORMATION FORM

Name: ____________________________  ____________________________  ____________________________
                  Last                     First                        Full

Your Current Mailing Address:

Street

City

State        Zip/Postal Code

Country

Your Permanent Mailing Address:

Street

City

State        Zip/Postal Code

Country

Telephone Number(s): ____________________________  ____________________________
                  Home                       Cell

Email Address: ________________________________________________________________

Do you wish to be on the Graduate Certificate in Conflict Resolution emailing list? Yes No
(Please keep in mind that this is our primary communication method)

Do you give permission for other conflict resolution graduate staff and faculty to know your email address? Yes No

Please list other M.A. program or certificate program that you are currently in.

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