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 Spark M. 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.
Name: ___________________________________________________________  
  Last   First   Full Middle

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 graduate program(s) that you are currently in.

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