

# Dispute Resolution

UNDERGRADUATE CERTIFICATE IN

## Recommendation Form

The Pepperdine University Undergraduate Certificate in Dispute Resolution is a joint enterprise between Straus Institute for Dispute Resolution and Seaver College. This certificate focuses on the fundamentals of Dispute Resolution and their application. Course work is drawn from both the Straus and Seaver catalogs.

**Applicant:** Please complete this section, then deliver or mail this form to the person recommending you. Ask him or her to return the recommendation to you in the attached envelope with his or her signature across the seal. Do not open the envelope or break the seal. Submit the sealed envelope with your application.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I understand that this recommendation will be used only for admission, and I hereby waive my right of access to this recommendation.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Respondent: Your judicious evaluation of the applicant is appreciated. We are using a self-managed application process. In order to preserve the confidentiality of this recommendation, please sign your name across the sealed flap of the envelope and return it to the applicant who will submit it with his/her application. Note: Unless the student has signed the above waiver, they have the right to review your recommendation.

Name of Respondent: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Please rate the applicant on the qualities listed below:

	Truly Exceptional (Top 5%)	Outstanding (Top 15%)	Above Average (Top 25%)	Average (Mid 50%)	Below Average (Lowest 25%)
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity & Judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I  highly recommend,  recommend,  recommend with reservation,  do not recommend this applicant.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Feel free to include additional comments on this student either on the back of this form or by attaching additional pages.