



EDUCATION AGENT APPLICATION FORM

AGENT DETAILS			
Date:			
Name:			
Legal Entity:			
Trading Name:			
Business Number:			
Address:			
Phone:		Fax:	
Email:		Website:	
COMPANY DESCRIPTION			
Please provide a description of your company:			
KEY PERSONNEL			
Please provide an overview of the key personnel within your company: (Attach additional pages as required)			
Name:			
Position:			
Background			
Name:			
Position:			



Background			
GENERAL			
Are you an authorised agent or member of an agent's association?			
What services do you provide or intend to provide to prospective students?			
What is your main country of operations?			
What are your Fees and Charges?			
REFEREES			
Please provide 2 referees:			
REFEREE 1			
Name:			
Address:			
Phone:		Fax:	
Email:		Website:	
REFERRE 2			
Name:			



Address:			
Phone:		Fax:	
Email:		Website:	
AUTHORISATION			
Authorisation for Processing			
Action to be taken:	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	
Date Effective:			
Comments:			
Name:		Position:	
Signature:		Date Processed:	/ /