Head Office: Level 4, 191 Thomas Street, Haymarket, NSW 200002 9163 8977 I www.atinstitute.edu.auI ABN 67604827509

RTO Code: 45475 | CRICOS Provider Number: 03751C

APPLICATION TO BE APPOINTED AS AN EDUCATION AGENT

| Company Profile | |
|--|-----------------|
| Company Details | |
| Company Name | |
| Street Address | |
| Postal Address | |
| Phone | |
| Web | |
| Fax | |
| Email | |
| Contact Officers | |
| Company Director / Principal | |
| Position | |
| Phone | |
| Email | |
| Company Background | |
| Business Registration (ABN) No. (if located in Australia) | |
| Business Registration Certificate (if located offshore) | |
| Details of registering country an d authority | |
| Has the company or any individ ual within the company ever be en involved in past, pending, th reatened or potential litigation, a rbitration, administrative actions or other disputes | |
| Business Profile/Strategic Plan | (please attach) |
| Key Business Activities (List) | |
| Year founded | |

Document Name: Education Agent application V3.0

Page 1 / 3

Released – Oct 2023

Review date – 2024



Head Office: Level 4, 191 Thomas Street, Haymarket, NSW 200002 9163 8977 I www.atinstitute.edu.auI ABN 67604827509

RTO Code: 45475 | CRICOS Provider Number: 03751C

| Company Background | |
|--|---|
| Years as an education agent | |
| Number of staff | |
| EATC Training (PIER Online) | □Yes / □No (if Yes, please attached Certificate) |
| Number of offices (locations) | |
| Sub-agencies | |
| Associations/ affiliations with other relevant organisations (List) | |
| Associations with any local authorities / governments / councils/etc. (List) | |
| China Approval (only for agents located in China) | Is your agency on the Chinese list of approved Agents by the Ministry of Education or under an approved agreement? Provide details: |
| Marketing | |
| Please indicate the geographical territory you will service. | |
| Provide description of your target market, trends, demands etc. | |
| Proposal for promotion and marketing in the territories. | |
| Performance | |
| Number of students sent abroad each year. | |
| Proposed number of students sent to us in the next year. | |
| Service Fees and Charges | |
| What services do you provide for students? | |
| Please provide details of any fees you charge students. | |

Document Name: Education Agent application V3.0



Head Office: Level 4, 191 Thomas Street, Haymarket, NSW 2000 02 9163 8977 **I** <u>www.atinstitute.edu.au</u> **I** ABN 67604827509

RTO Code: 45475 | CRICOS Provider Number: 03751C

| Referees - MINIMUM 2 REFEREES REQUIRED | | |
|--|---|--|
| Educational Referees (1) | | |
| Name | | |
| Position | | |
| Organisation | | |
| Address | | |
| Phone | | |
| Email | | |
| Educational Referees (2) | | |
| Name | | |
| Position | | |
| Organisation | | |
| Address | | |
| Phone | | |
| Email | | |
| Educational Referees (3) | | |
| Name | | |
| Position | | |
| Organisation | | |
| Address | | |
| Phone | | |
| Email | | |
| d professional manner. I agree to: Regularly monitor policies and cheat (www.homeaffairs.gov.au). Regularly monitor policies and report. of Education website. I have read the National Code of | u as an educational representative and I agree to do so in an honest an nanges to the policies as reported on the Home Affairs website egulations and changes to these policies and regulations as reported on the Practice for Registration Authorities and Providers of Education and Training and agree to adhere to the relevant Standards. | |
| Signed: | | |
| Name: | Date: | |
| Organisation: | Position: | |

Document Name: Education Agent application V3.0