

# AGENT APPLICATION FORM

Version 1.0 Feb. 2025



Thank you for your interest to become one of our Accredited Education agent, please complete this form and return it to us with the following supporting documents: • **ABN** • **Company's profile** • **QEAC** or **MARN registration**

Our Marketing department holds a meticulous process to analyse the application of new education agents in which may take up to two weeks from the submission of this form.

## Official Use Only

Referees Checked by:

Agent Agreement Prepared by:

Agent Certificate Number (if applicable):

Date:

## AGENCY DETAILS

Agency Name:				Director(s):		
ABN (if applicable):			Tax Registered:	<input type="radio"/> YES	<input type="radio"/> NO	
Australian Migration Agency Number (if applicable):						
Address:						
Suburb:	State:	Post Code:	Country:			
Phone:	Mobile:	Email:				
Year of Foundation:	Number of Staff:	Website:				

## ABOUT YOUR STUDENTS

List Institutions currently representing in Australia:

1	
2	
3	

The countries/regions **MAINLY** covered by you:

Nationality 1	
Nationality 2	
Others	

How many students will you send in next six months?

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**NUMBER** of Students you placed last year:

VET	
ELICOS	
Others	

List the most popular courses you promote now:

1	
2	
3	

Any email address for receiving marketing materials?

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## REFERENCES

Institution		Contact Person		Email	
Institution		Contact Person		Email	

Name of Director(s)

Signature of Director(s)

Date