

**Agent Application Form** 

| COMPANY DETAILS   |           |                                       |                       |  |  |
|---|-----------|---------------------------------------|-----------------------|--|--|
| Company legal name:   |           |                                       |                       |  |  |
| Company trading name:   |           |                                       |                       |  |  |
| Business address Building/property name:  |           | umber:                                | Street or Lot number: |  |  |
| Street Name: Suburb/  |           | vn:                                   | State/territory:      |  |  |
| Postcode:   | Province: | Country:                              |                       |  |  |
| Phone: Email:   |           | Website URL:                          |                       |  |  |
| Company registration number:  |           | Australian business number (ABN):     |                       |  |  |
| DETAILS OF KEY DIRECTORS AND EMPLOYEE/S   |           |                                       |                       |  |  |
| Key Director/Employee 1:  |           |                                       |                       |  |  |
| Title:   Mr   Miss   Dr   Other (Please specify):   |           |                                       |                       |  |  |
| First name:   |           | Surname:                              |                       |  |  |
| Position:   |           | Gender: □ Male □ Female □ Unspecified |                       |  |  |
| Phone:  |           | Email:                                |                       |  |  |
| Tertiary qualification(s):   Yes   No Please specify:   |           |                                       |                       |  |  |
| Australian qualifications:   Yes   No Please specify:   |           |                                       |                       |  |  |
| Experience as an agent:   Yes   No Please specify:  |           |                                       |                       |  |  |
| How many years have you been working as an Education Agent?                                   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
| Key Director/Employee 2:  |           |                                       |                       |  |  |
| Title: DMr Mrs Miss Dr Other (Please specify):  |           |                                       |                       |  |  |
| First name:   |           | Surname:                              |                       |  |  |
| Position:   |           | Gender: □ Male □ Female □ Unspecified |                       |  |  |
| Phone:  |           | Email:                                |                       |  |  |
| Tertiary qualification(s):   Yes   No Please specify:   |           |                                       |                       |  |  |
| Australian qualifications: ☐ Yes ☐ No Please specify:   |           |                                       |                       |  |  |
| Experience as an agent:   Yes   No Please specify:  |           |                                       |                       |  |  |
| How many years have you been working as an Education Agent?                                   |           |                                       |                       |  |  |
| SERVICES AVAILABLE TO STUDENTS  |           |                                       |                       |  |  |
| What advertising media are used to recruit students? E.g. social media, newspapers, radio, TV |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
| Which languages are used in advertising for students?   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
| Please outline the support services you can offer to students.                                |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |
|   |           |                                       |                       |  |  |

1



**Agent Application Form** 

| DESCRIPTION OF POTENTIAL MARKET  |                                |                        |  |  |  |  |
|--|--------------------------------|------------------------|--|--|--|--|
| From which geographical area will your potential markets come? Please describe any strengths you have in these regions to justify your choice.   |                                |                        |  |  |  |  |
| Please describe the characteristics of your potential markets (age, income, educational background, university networks, etc. Please use separate sheets, if necessary.  |                                |                        |  |  |  |  |
| In what training field/courses have you successfully recruited students in the last 12 months?  Higher Education:  Business   IT   Management   Other (Please specify):  |                                |                        |  |  |  |  |
| Vocational Education and Training:  Business IT Automotive Hair and Beauty Childhood Education and Care General English EAP Other (Please specify):  |                                |                        |  |  |  |  |
| REFERENCE  |                                |                        |  |  |  |  |
| Please provide the name and other details of at least 2 references currently dealing with your organization from Education Sector- *Universities/Institutes/College/RTOs/Schools   |                                |                        |  |  |  |  |
| University/Institute/College/RTO/School Representative 1   |                                |                        |  |  |  |  |
| University/Institute/College/RTO/School name:  |                                |                        |  |  |  |  |
| Title: □ Mr □ Mrs □ Miss □ Dr □ Other (Please specify):  |                                |                        |  |  |  |  |
| Contact person name:   | Phone:                         | Et                     | mail:                                    |  |  |  |
| Years of Agreement:  | •                              | Country of Provide     | er:                                      |  |  |  |
|  |                                |                        |  |  |  |  |
| University/Institute/College/RTO/School Representative 2   |                                |                        |  |  |  |  |
| University/Institute/College/RTO/School name:  |                                |                        |  |  |  |  |
| Title:   Mr   Mrs   Miss   Dr   Other (Please specify):  |                                |                        |  |  |  |  |
| Contact person name:   | Phone:                         | E                      | Email:                                   |  |  |  |
| Years of Agreement:  | Country of Provider:           |                        |  |  |  |  |
| OTHER INFORMATION  |                                |                        |  |  |  |  |
| How many of your staff are engaged in  | consultancy:                   | □ 1-5 □ 5-10 □ 10+     |  |  |  |  |
| How many students did you send to A  | □ 1-20 □ 20-50 □ 50-100 □ 100+ |                        |  |  |  |  |
| How many students does your company enrol in education institution each year?  |                                |                        | □ 1-20 □ 20-50 □ 50-100 □ 100+           |  |  |  |
| No of Visa refusals in each year:  |                                |                        | □ 1-5 □ 5-10 □ 10-30 □ 30+               |  |  |  |
| DOCUMENTS REQUIRED   |                                |                        |  |  |  |  |
| ☐ Filled agent application form ☐ Co   | mpany profile 🗆 🖰              | QEAC certificate (If a | any) 🗆 Business registration certificate |  |  |  |
| AGENT OBLIGATIONS  |                                |                        |  |  |  |  |
| AIPT Group PTY LTD may terminate the agreement at any time and with immediate effect by giving notice to the agent if the agent breached any provision of the agent agreement. It is expected that all information provided herein is true and correct. Should any information found to be false and misleading during our internal check, then your application will be rejected. |                                |                        |  |  |  |  |
| Agent Name:  | Agent Signature:               |                        | Date:                                    |  |  |  |

Location: Ground Floor, 301-311 Flinders Lane. Melbourne VIC 3000 Australia M101\_v2.0