



AGENT APPLICATION FORM

AGENCY DETAILS

Company Legal Name:

Company Trading Name:

ABN (if applicable):

ACN:

Contact Person:

Position:

Phone / Mobile:

Fax:

Email:

Website:

CONTACT DETAILS

ONSHORE Office Address -

Building/Property Name:

Flat/Unit details:

Street Number:

Street Name:

City/Suburb:

State/Country:

Post Code:

OFFSHORE Office Address -

Building/Property Name:

Flat/Unit details:

Street Number:

Street Name:

City/Suburb:

State/Country:

Post Code:

SURVEY QUESTIONS

How many staff / course counsellors does your company employ?

What are the nationalities of students that you recruit?

Do you have agreements with other institutes, please provide details?

What services does your company provide to the students – potential or current?



AUSTRALIAN COLLEGE OF THE PROFESSIONS

| | |
|--|--|
| What fees does your company charge for these services? | |
| Do you have the knowledge and a good understanding of the requirements of the Education Services for Overseas Students ESOS Act (2000) and National Code (2018) as an Education Agent? | Yes No |
| What is the total number of students referred to Australian educational institutions over the past 2 years? | High School & ELICOS Courses: _____ Vocational Course: _____ Undergraduate Course: _____ |

How did you hear about Australian College of the Professions (ACP)?

| | |
|---------------------|----------------------|
| Website | Exhibition |
| Friends / Relatives | Newspaper / Magazine |
| Agent _____ | Other _____ |

SUPPORTING DOCUMENTS

Certificate of Registration / ABN

Business licenses (If relevant in country of operation)

REFEREES

Please list the names and contact details of 2 referees.

| | |
|---------------------------|-------|
| Name of Contact Person 1: | |
| Name of Institution: | |
| Email | Phone |
| Name of Contact Person 2: | |
| Name of Institution: | |
| Email | Phone |

AGENT DECLARATION

I confirm that the information provided is true and accurate.

Name of the Contact Person: _____ Position:- _____

Signature: _____ Date: _____