

AGENT APPLICATION FORM

Contact Details

Company Name:

Director(s) Name(s):

ABN (If Available):

Address:

Phone: Fax: Mobile:

E-mail: Website:

Is this the Head Office or Branch Office?

If Branch Office, Please provide Address of the Head office:

Business Background

The year in which Business was established?

Evidence of Registration Certificate of Registration of Business Others

No. of International Students referred to Australian Educational Institutes Last Year

Names of the Australian Educational Institutions that you already represent

Services that are provided by you to the Students

Student Counseling Visa Application IELTS Services

Pre – departure Briefing Airport Pick – up Accommodation

Others Please Specify:

Do you charge fees for the above mentioned services from the students? Yes No

Understanding of and Complying with ESOS Requirements

Are you prepared to regularly monitor:

The Department of Home Affairs website (www.homeaffairs.gov.au) Yes No

The National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code 2018) Yes No

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Do you understand that you must not make any representations or offer any guarantees about achieving residential status in Australia, but that you can refer students to the Department of Home affairs website?

Yes No

Are you prepared to comply with all requirements of Angad Australian Institute of technology Pty Ltd about advertising and the course material, application procedures and providing information to the students?

Yes No

Are you prepared to only use material supplied by Angad Australian Institute of Technology Pty Ltd to describe Angad Australian Institute of Technology Pty Ltd and its courses?

Yes No

Referees

Please list two references in order to get your application processed faster.

Referee 1

Name:

Position:

Company:

Phone: Fax:

E-mail:

Referee 2

Name:

Position:

Company:

Phone: Fax:

E-mail:

DECLARATION:

I am interested in representing Angad Australian Institute of technology Pty Ltd as an educational agent. I hereby declare to the best of my ability that the information entered in this form is correct and complete and I have never been convicted of engaging in dishonest or deceptive practices.

Signature:

Date:

Place:

(Please attach a copy of Company Profile / Marketing Proposal along with this application)

