**Education Agents Application Form**

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| **Company Details and Background** | | | |
| Company Legal Name |  | Trading name |  |
| ABN |  | Year of Registration |  |
| Name of Director/CEO |  | Contact details |  |
| Professional membership |  | | |
| Manager |  | Contact details |  |
| Professional membership |  | | |
| Business Address |  | | |
| Email |  | Phone |  |
| Website |  | Number of staff |  |
| **Please describe your business activities:** | | | |

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| **Potential Market and services to be provided** | | | | | | |
| What are your target markets? | | | | | | |
| What marketing strategies will you use to promote our courses? | | | | | | |
| Please outline any support services that you offer prospective students? | | | | | | |
| Number of students referred to Australian education institutions over the past year:  VET: ELICOS: Graduate: Postgraduate: | | | | | | |
| Please list any other institutes you represent in Australia | | | | | | |
| How many students have you referred to Australian educational institutions in the past 2 years? | | | | | | |
| Do you have a comprehensive understanding of the requirements of the ESOS Act and National Code?  Yes □ No □ | | | | | | |
| Is your company involved in any other activities? Yes □ No □    If yes, please explain\_\_\_\_\_\_ | | | | | | |
| Are you accredited to act as an education agent in your country? Yes □ No □  (Applicant from the People’s republic of china must provide evidence that they hold a license to act as a registered agent, or have a contract with a registered license holder) If Yes, please provide details: | | | | | | |
| **References:** | | | | | | |
| Please provide two referees details (Australian Business) | | | | | | |
| Referee1: | | | | | | |
| Name of Institution | |  | | | | |
| Contact Person | |  | Position: | |  | |
| Phone Number | |  | Email: | |  | |
| Referee2: | | | | | | |
| Name of Institution | |  | | | | |
| Contact Person | |  | Position: | |  | |
| Phone Number | |  | Email: | |  | |
| **Declaration** | | | | | | |
| Please sign the declaration below:   * I understand that Institute of Business and Management (Victoria) is not under any obligation to accept my application to act as an agent to recruit students on their behalf. * I understand that if my application to become an agent of Institute of Business and Management (Victoria) is successful, I will be required to enter into and abide by a formal agency agreement. * I confirm that I have all the necessary registrations, accreditations and permissions to act as an education agent in all the territories which I have nominated, and understand that I must notify the college if any changes occur in the registration status of my agency. * I have read, understand and agree to abide by the terms and conditions of the Institute of Business and Management (Victoria)’s privacy policy. * I consent to Institute of Business and Management (Victoria) to contact any of the referees I have nominated. * I undertake that the above information provided in this application is a true and accurate record as to the operation of the educational agency I represent. * By returning this application to Institute of Business and Management (Victoria), I agree to abide by the terms and conditions in the mentioned declaration.   **Address & Contact for notices:**  Building D, 60 Belfast Street, Broadmeadows, 3047, VIC  Phone: +61 3 9478 3163  Email: [info@ibm.vic.edu.au](mailto:info@ibm.vic.edu.au)  Website: <https://ibm.vic.edu.au> | | | | | | |
| Signature: |  | | | Date: | |  |
| Printed Name: |  | | | | | |