

Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath

Coláiste na Tríonóide, Baile Átha Cliath The University of Dublin

AGENT AUTHORISATION FORM

STUDENT DETAILS				
STOPENT PETALS				
Family name	TCD REF ID			
Given name	Course Applied	l to		
Date of birth	Phone no.			
Email address				
NEW APPLICATION- AGENT AUTHO	RISATION			
Name of Agency				
Branch Location				
Email Address				
	Phone No.			
	PHONE NO.			
Student's Signature:	Date:			
ADDING O	R CHANGING AGENT REPRESI	ENTATIVE		
1. ADD AN AGENT REPRESENTATIVE REQUEST				
 I applied directly to Trinity Colle 	ge Dublin. I am now seeking to appoint	an agent representative.		
Name of Agency				
Branch Location				
Email Address				
Phone				
Please select the level of service(s) provided by your agent representative				
1. RECEIVING AN OFFER	2. ACCEPTANCE OF OFFER	3. VISA APPLICATION		
Agent's Signature:	Date:			



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2. **CHANGE OF AGENT REPRESENTATIVE REQUEST**

I want to remove my previous agent representative and appoint a new agent representative

What is the reason for seeking a change of agent representative or removing an agent representative? Please

select one:	seeking a change of agent re	presentative or removing an	agent representative: Flease	
Agent rep	resentative provided incorrect o	or misleading information.		
-	resentative is not responsive to	my requests.		
• Other (Ple	ease explain):			
PREVIOUS AGENT REPR	ESENTATIVE INFORMATION			
Name of Previous Agenc	:y			
Branch Location				
Email Address				
Phone				
NEW AGENT REPRESENTATIVE INFORMATION				
Name of New Agency				
Branch Location				
Email Address				
Phone				
Please select the level of service(s) provided by your new agent representative				
1. APPLICATION	2. RECEIVING AN OFFER	3. ACCEPTANCE OF OFFER	4. VISA APPLICATION	
SUBMISSION				
New Agent's Signature:		Date:		



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3. Declaration

Student's Declaration

- I hereby certify that the information I have provided on this application form is correct and complete.
- I hereby certify that I have contacted my previous agent to notify them that I am now seeking representation by my new agent.
- I understand that this form replaces any previous advice I have provided regarding representation of my Trinity College Dublin application.

Student's Signature:	Date:

*You must lodge the completed form, by email to nilanjana.shihn@tcd.ie

THIS FORM IS NOT AN APPLICATION FOR ADMISSION

Who Should use this form?

- If you are engaging the services of an agent after you have already applied, you should use this from.
- If you are changing from one Trinity agent to another during the application process, you should use this form.

Who should not use this form?

• If you have notified us on your application that you are using an agent, you should not use this form