



EDUCATION AGENT APPLICATION FORM

COMPANY DETAILS

Legal Entity Name _____

Trading Name (if any) _____

ABN/ACN

If company is registered offshore, which country? _____

HEAD OFFICE DETAILS

Main Contact _____

Address _____

Telephone _____ Fax _____

Email _____

Website _____

PRINCIPAL AGENT

Full Name _____

Position title _____

List your Tertiary qualification(s)

List your Australian Qualification(s):

STAFF QUALIFICATIONS AND TRAINING

Does your company directly employ staff member/s registered with the office of Migration Agents Registration

Authority? ☐ YES ☐ NO

(if YES, provide details) _____

Have you or any of your company's employees completed any of the following training

[Education Agent Training Course \(EATC\)](#)

☐ YES

☐ NO

[ISANA National Code Online Tutorial](#)

☐ YES

☐ NO

How many counsellors/student advisors does your company employ?



EDUCATION AGENT APPLICATION FORM

REPRESENTATION OF OTHER EDUCATIONAL INSTITUTIONS

Does your company have formal agreements to directly represent other Australian institutions?

☐ YES (if YES, please provide some of the names of these institutions)

☐ NO

1. _____
2. _____
3. _____

Does your company have formal agreements to directly represent institutions located in countries other than Australia?

☐ YES (if YES, please provide some of the names of these institutions)

☐ NO

1. _____
2. _____
3. _____

RECRUITMENT OF STUDENTS

Does your company have current marketing materials?

☐ YES

☐ NO

(If YES, please attach a copy of your marketing material with your application.)

List the marketing channels your company currently utilises to recruit students to Australia:

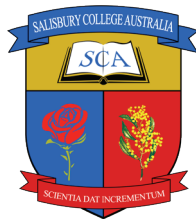
1. _____
2. _____
3. _____

Does your company produce an annual marketing plan?

☐ YES (if YES, please attach to your application)

☐ NO





EDUCATION AGENT APPLICATION FORM

REFERENCES

1

Name of Contact Person _____
Telephone _____
Name of Institution _____
Email _____

2

Name of Contact Person _____
Telephone _____
Name of Institution _____
Email _____

3

Name of Contact Person _____
Telephone _____
Name of Institution _____
Email _____

PLEASE ATTACH YOUR COMPANY PROFILE AND ANY OTHER INFORMATION YOU CONSIDER TO BE OF IMPORTANCE TO THIS APPLICATION.

AGENT DECLARATION

Does your company produce an annual marketing plan?

☐

I declare that the information that I have provided to the best of my knowledge is true and correct.

☐

I understand that Salisbury College Australia is required to publish our company/agent details on their website (this is a requirement under Standard 4 of the National Code)

Full Name _____

Agent Signature _____ Date _____