

International Education Agent Application Form

This form is to be completed by a person authorised to act on behalf of the organisation.

Please complete this form and submit via return email with all required evidence for processing to stewart.r@astartraining.edu.au

1. COMPANY DETAILS

Company – Business Name

Trading Name

Abbreviation of Business Name

Company – Business Registration Number

Name of CEO

Place of Registration

2. BUSINESS DETAILS

Business Address

Phone

Email

Website

3. BUSINESS PROFILE

MAIN Business Activities

Years Established

Number of Staff

Number of Advisers/Counsellors

Number of Offices

Location of International Offices

4. DIRECTORS AND KEY PERSONNEL DETAILS

Personnel -1 Name

Position

Qualifications and Previous Experience

Membership of Education Agent Professional Bodies

Personnel -2 Name

Position

Qualifications and Previous Experience

Membership of Education Agent Professional Bodies

Personnel -3 Name

Position

Qualifications and Previous Experience

Membership of Education Agent Professional Bodies

5. AGENCY PERFORMANCE DETAILS

How many Australian Educational institutions are you currently representing

Please provide details of each below.

-
- A. [Click here to enter details](#)
 - B. [Click here to enter details](#)

Please list the total number of students referred to Australian Educational Institutions in the following areas in the last two (2) years.

Please list the Vocational Courses

6. COMPLIANCE REQUIREMENTS AND DETAILS

Please provide a brief explanation regarding how you and your organisation fulfil your responsibilities as agents with reference the implied responsibilities of education agents as set out in National Code 2018 Standard 4.

Have you or any of your staff completed the Education Agents Training Course (EATC) available on www.pieronline.org? Provide details

Do you have the knowledge and a good understanding of the requirements of the ESOS Act and National Code?
Yes ☐ or No ☐

How could you provide evidence that 'Yes' you do?

Do you regularly monitor the Australian Department of Immigration and Border Protection website?

Yes ☐ or No ☐

How could you provide evidence that 'Yes' you do?

Do you regularly monitor the Department of Education, Employment and Workplace Relations website?

Yes ☐ or No ☐

How could you provide evidence that 'Yes' you do?

What is the primary purpose, you understand and advise to students coming to Australia on a student visa?

Answer [Click here to enter text.](#)

How could you provide evidence of this?

Are you willing to comply with the requirements of the Institute regarding advertising? Yes ☐ or No ☐

Are you willing to comply with the requirements of the Institute regarding course materials and application procedures, and provide accurate information to students? Yes ☐ or No ☐

Are you prepared to use materials by the Institute to promote its courses Yes ☐ or No ☐

7. DESCRIPTION OF POTENTIAL MARKET & SERVICES

Which are your target markets? Please describe any strengths you have in these markets in the space provided below.

What do you believe is the most effective marketing strategy to use in your area, region or market?

Please outline the support services you can offer students

Do you charge students any service fees? If YES, please provide details of what you charge and for what service/s.

Please provide any other information you consider to be of importance to this application and marketing to students.

8. REFERENCE CHECK

Please list the names and contact details of three (3) academic referees

REFEREE for EDUCATIONAL INSTITUTION - **ONE**

Main Contact Person

Position

Contact Phone Number

Email

REFEREE for EDUCATIONAL INSTITUTION - TWO

Main Contact Person

Position

Contact Phone Number

Email

REFEREE for EDUCATIONAL INSTITUTION - THREE

Main Contact Person

Position

Contact Phone Number

Email

9. DECLARATION

I

declare that I have read and understood the extract from the ESOS Act 2000, National Code 2018 and our obligations as Agents. That the answers and details provided in this application are true and accurate to the best of my knowledge and I authorise the Institute to approach referees to collect any information or details as the Institute may require.

Signature: _____

Date: _____

Position: _____

10. AGENT CHECKLIST

Please attach copies of the following documents:

- ☐ Company/Business registration Certificate
- ☐ Business Profile
- ☐ Details of Educational Institutions Currently represented
- ☐ Copies of completed Education Agents Training Course (EATC) or equivalent
- ☐ Other relevant materials where applicable

Privacy Policy: All personal information collected, used or disclosed by the College is confidential and is protected by the Privacy Act 1988 (Cth), the Information Privacy Act (for all states of Australia) and other relevant Australian legislation. Information about Agents or students may be made available to Commonwealth and State Agencies if requested. ASTAR Training Institute reserves the right not to proceed with providing an International Education Agreement for reasons it may see fit to apply.

ATI OFFICE USE ONLY

Date Received

Received by

Processed by

Referee checks completed

Yes ☐ No ☐

Outcome of reference checks

Approved to create an Agent Agreement ☐ or Denied ☐ Reason for denial

Signed:

Date: