



Education Agent Application Form

| COMPANY DETAILS AND BACKGROUND | |
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| Company / Business Name: | |
| Trading name: <i>(if different from Company name)</i> | |
| Company/ Business Registration Number: | |
| Year Established: | |
| Name of Director/ CEO: | |
| Town and Country of Company/ Business Registration: | |
| Business Address: | |
| Phone: | |
| Email: | |
| Website: | |
| Please describe your business activities: | |
| Number of staff: | |
| Number of international offices: | |
| Locations of International Offices: | |



| DIRECTOR AND EMPLOYEE DETAILS – PERSON ONE [1] | |
|--|--|
| Name: | |
| Position: | |
| Qualifications and previous experience: | |
| Membership of education agent professional bodies: | |
| DIRECTOR AND EMPLOYEE DETAILS – PERSON TWO [2] | |
| Name: | |
| Position: | |
| Qualifications and previous experience: | |
| Membership of education agent professional bodies: | |
| DIRECTOR AND EMPLOYEE DETAILS – PERSON THREE [3] | |
| Name: | |
| Position: | |



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|---|--|
| Qualifications and previous experience: | |
| Membership of education agent professional bodies: | |

| POTENTIAL MARKETS AND SERVICES TO BE PROVIDED | |
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| 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. | |
| Do you charge students any fees for your service? If YES, please provide details of the services and relevant fee for each. | |
| AGENCY PERFORMANCE AND COMPLIANCE | |
| How many Australian education institutions are you currently representing? | |



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| How many students have you referred to Australian educational institutions in the past 2 years? | |
| Please briefly outline how you and your organisation will fulfil your responsibilities as an education agent as required by the National Code 2017. <i>Please attach additional information such as company flyers etc. if required.</i> | |
| Have you or any of your staff completed the Education Agents Training Course (EATC) available through www.pieronline.org? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If you have answered 'yes' to the previous question, please list names of those who have completed the course | |
| Do you have a comprehensive understanding of the requirements of the ESOS Act and National Code? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Do you regularly monitor the websites of the Department of Home Affairs, Department of Education, Skills and Employment and the National Register of VET (training.gov.au)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you willing to comply with the requirements of Australasian International Academy regarding advertising, course materials and application procedures, and provide accurate information to students? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you prepared to use the marketing materials provided by Australasian International Academy to promote our courses? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| ADDITIONAL INFORMATION | |



Please provide any other information that you think will support your application.

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| Please provide any other information that you think will support your application. | |
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REFERENCES

Please provide details of at least 3 Australian educational institutes that we can contact for a reference

Reference One [1]

Name of Institution/Organisation:

Contact Person:

Position:

Phone Number:

Email Address:

Dates when you worked with them:

Reference Two [2]

Name of Institution/Organisation:

Contact Person:

Position:

Phone Number:



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| Email Address: | |
| Dates when you worked with them: | |
| Reference Three [3] | |
| Name of Institution/Organisation: | |
| Contact Person: | |
| Position: | |
| Phone Number: | |
| Email Address: | |
| Dates when you worked with them: | |

DECLARATION

In signing this form, you declare and consent to the followings (please tick):

- You have read and understood the extract from the ESOS Act 2000 Obligations of Agents.
- The answers and details provided in this application are true, accurate and complete.
- Paramount International College is authorised to contact the referees listed to collect information about my conduct and services.
- You acknowledge and agree to the privacy statement provided below:

Privacy Statement: All information collected, used or disclosed by Paramount International College is confidential and is protected by the Privacy Act 1988 and other relevant legislation. Paramount International College policy is outlined in the Information Privacy Policy available from our website. Information about Agents or students may be made available to Commonwealth and State agencies if required to provide the information by law.

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| Printed Name: | |
| Signature: | |
| Date: | |

Please return this form along with supporting evidence to Australasian International Academy or email to. info@pic.edu.au