

**Note:**

- Please complete this form and return it to us with the supporting documents e.g., Company registration certificates, company profile by email.
- Please note Education Agent Agreement and Education Agent Certificate may take up to 2 weeks from the submission of this form.

| Company Information   |           |                         |
|---|-----------|-------------------------|
| Company legal entity:   |           |                         |
| Company trading name:   |           |                         |
| Australian business number (if applicable):   |           |                         |
| Australian migration agency number (if applicable):   |           |                         |
| Company postal address:   |           |                         |
| City/Suburb:  | Postcode: | Country (if Australia): |
| Director(s) / CEO name(s):  |           |                         |
| Main office contact details   |           |                         |
| Contact name(s):  |           |                         |
| Phone:  | Fax:      |                         |
| Mobile:   |           |                         |
| Email:  | Website:  |                         |
| Agent details   |           |                         |
| How long has your business been operating?  |           |                         |
| List of three institutions you are currently representing in Australia:   |           |                         |
| 1.  |           |                         |
| 2.  |           |                         |
| 3.  |           |                         |
| Key Business Activities (List)  |           |                         |
| Number of students sent to Australia per year:  |           |                         |
| Number of staff:  |           |                         |
| Services provided to students:  |           |                         |
| Have you or your staff completed EATC Training?   <a href="https://www.icef.com/academy/courses/education-agent-training-course-eatc/">https://www.icef.com/academy/courses/education-agent-training-course-eatc/</a> |           |                         |
| <input type="checkbox"/> Yes <input type="checkbox"/> No  |           |                         |
| If 'Yes', Name of staff:  |           |                         |

| <b>Member of associations:</b>   |               |  |
|--|---------------|--|
| <b>Number of offices (locations):</b>  |               |  |
| <b>How do you promote Australian International education and how will you promote our Institute?</b>   |               |  |
| <input type="checkbox"/> Offshore <input type="checkbox"/> Onshore <input type="checkbox"/> Others (Please specify):   |               |  |
| <b>The countries/regions covered by your agency:</b>   |               |  |
| <b>What is your projected number of students you plan to send in the next six months?</b>  |               |  |
| <b>Provide following information about each of the agent's employees (if any) who are involved in the educational counselling for admission(s)</b>   |               |  |
| Name   | Email Address | Migration Agent Registration No. (if applicable) |
|  |               |  |
|  |               |  |
|  |               |  |
|  |               |  |
|  |               |  |
| <b>References (Minimum 2 to be provided)</b>   |               |  |
| Reference 1  | Reference 2   |  |
| Contact name:  | Contact Name  |  |
| Organisation:  | Organisation: |  |
| Email:   | Email:        |  |
| Phone:   | Phone:        |  |
| <b>Deceleration</b>  |               |  |
| <p>I am interested in representing Sapience College (SC) as an education agent and I agree to do so in an honest and professional manner. I agree to:</p> <ul style="list-style-type: none"> <li>Regularly monitor policies and changes to the policies as reported on the Department of Home Affairs (DHA) website.</li> <li>Regularly monitor policies and regulations and changes to the policies and regulations as reported on the Department of Education website.</li> <li>Regularly monitor policies and regulations and changes to the policies and regulations as reported on the Department of Employment and Workplace Relations website.</li> <li>I have read the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students and agree to adhere to the relevant Standards.</li> </ul> |               |  |
| Signature:   |               |  |
| Name:  | Role:         | Date:  |

**Please forward a copy of your Business Profile with this Education Agent Application Form**

**Office Use Only**

**Application Accepted**

Yes

No

If 'No', Reason: