

## **Education Agents Application Form**

Company Details and Background							
Company Legal Name		Trading name					
ABN		Year of Registration					
Name of Director/CEO		Contact details					
Professional membership		Contact details					
· · · · · · · · · · · · · · · · · · ·		Contact details					
Manager Professional membership		Contact details					
Business Address							
Email		Phone					
Website		Number of staff					
Please describe your busing							
Please describe your busine	ess activities:						
Potential Market and se	ervices to be prov	vided					
What are your target marke	ts?						
in at a constant of the second s							
What marketing strategies will you use to promote our courses?							
Please outline any support services that you offer prospective students?							
,							
Number of students referred to Australian education institutions over the past year:							
VET: ELICOS:							
VET. ELICOS.	Graduate:	Postgraduate:					

How many students have you referred to Australian educational institutions in the past 2 years?

Do you have a comprehensive understanding of the requirements of the ESOS Act and National Code? Yes □ No □

Is your company involved in any other activities? Yes  $\Box$  No  $\Box$ 

 Education Agent Application form
 Implemented: February 2021
 Reviewed By: February 2022
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 Institute of Business and Management (Victoria)
 info@ibm.vic.edu.au
 www.ibm.vic.edu.au
 Building D, 60 Belfast Street Broadmeadows VIC 3047



If yes, please explain\_\_\_\_

Are you accredited to act as an education agent in your country? Yes  $\Box$  No  $\Box$  (Applicant from the People's republic of china must provide evidence that they hold a license to act as a registered agent, or have a contract with a registered license holder) If Yes, please provide details:

References:					
Please provide two referees details (Australian Business)					
Referee1:					
Name of Institution					
Contact Person		Position:			
Phone Number		Email:			
Referee2:					
Name of Institution					
Contact Person		Position:			
Phone Number		Email:			
Declaration					

Please sign the declaration below:

- I understand that Institute of Business and Management (Victoria) is not under any obligation to accept my application to act as an agent to recruit students on their behalf.
- I understand that if my application to become an agent of Institute of Business and Management (Victoria) is successful, I will be required to enter into and abide by a formal agency agreement.
- I confirm that I have all the necessary registrations, accreditations and permissions to act as an education agent in all the territories which I have nominated, and understand that I must notify the college if any changes occur in the registration status of my agency.
- I have read, understand and agree to abide by the terms and conditions of the Institute of Business and Management (Victoria)'s privacy policy.
- I consent to Institute of Business and Management (Victoria) to contact any of the referees I have nominated.
- I undertake that the above information provided in this application is a true and accurate record as to the operation of the educational agency I represent.
- By returning this application to Institute of Business and Management (Victoria), I agree to abide by the terms and conditions in the mentioned declaration.

## Address & Contact for notices:

Building D, 60 Belfast Street, Broadmeadows, 3047, VIC

Phone: +61 3 9478 3163

Email: info@ibm.vic.edu.au

Website: https://ibm.vic.edu.au

Signature:

Date:

Printed Name:

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