

International Agent Application Form

1. COMPANY DETAILS

Company/Legal Entity Name			
Trading Name		ABN/ACN (Australia Only)	
Office Address		Telephone	
		Email	
		Website	
		No of Staff	
Contact Person		MARN (if applicable)	

2. DETAILS OF COMPANY DIRECTOR(S)

Name of Director 1		Name of Director 2	
Mobile No		Mobile No	
Email		Email	

3. Business Background

In which year was your business established?	
How many students did you send to Australian educational Institutes last year?	
Names of the Australian Educational Institutions that you already represent	
Which territories does your business recruits students from?	
How many students can you recruit for the institute in the next 12 months?	

4. Services Provided to Students

Student Counselling <input type="checkbox"/>	Visa Application <input type="checkbox"/>	IELTS/PTE Coaching <input type="checkbox"/>	Pre-departure Briefing <input type="checkbox"/>
Airport Pickup <input type="checkbox"/>	Accommodation <input type="checkbox"/>	Others (Please Specify)	

5. REFERENCES

Reference 1		Reference 2	
Institution Name		Institution Name	
Contact Name		Contact Name	
Position		Position	
E-mail		E-mail	
Mobile		Mobile	

6. Understanding of and complying with ESOS Requirements

Are you prepared to regularly monitor:	
1. The Department of Home Affairs website(www.homeaffairs.gov.au)	<input type="checkbox"/>
2. The National Code of Practice for Providers of Education and Training to Overseas Students 2018 (National Code 2018)	<input type="checkbox"/>
3. Do you understand that you must not make any representations about achieving residential status in Australia, but that you can refer students to the DIBP website?	<input type="checkbox"/>
4. Are you prepared to comply with all requirements of the institute about advertising and the course material, application procedure and providing information to the students?	<input type="checkbox"/>
5. Are you prepared to only use materials supplied by the institute to market its courses.	<input type="checkbox"/>

DECLARATION

I declare that the information in this form and supporting documentations are true and correct. I authorise Culinary Institute Australia to contact my referees. I acknowledge that approval of my application is conditional on my company signing an Agent Agreement with the institute in accordance with National Code 2018 and VET Quality Framework (VQF) including standards for RTO. I am aware of the Agent's code of conduct and understand that the provision of incorrect information or documents or withholding of information relating to application may result in the termination of the agreement.		
Name:	Signature:	Date:

For Office Use Only

Approved
 Not Approved

Date