

EDUCATION AGENCY APPLICATION FORM (OFFSHORE- INTERNATIONAL STUDENTS RECRUITMENT)

EDUCATION AGENT DETAILS

LEGAL ENTITY			
TRADING NAME/S			
BUSINESS REGISTRATION NO.			
ADDRESS			
SUBURB		POSTCODE	
STATE		COUNTRY	
WEBSITE		PHONE NUMBER	

MAIN CONTACT PERSONS

1.AGREEMENT/MANAGEMENT			
MARA/OVERSEAS EDUCATION AGENT ID/QEAC NO.		EMAIL	
2.ADMISSIONS/MARKETING			
MARA/OVERSEAS EDUCATION AGENT ID/ QEAC NO.		EMAIL	
3.FINANCE/COMMISSION			
MARA/OVERSEAS EDUCATION AGENT ID/ QEAC NO.		EMAIL	

STUDENT RECRUITMENT DETAILS

Countries of recruitment		
Country 1:	Country 2:	Country 3:

Provide the total number of international students you have successfully enrolled for the following categories in AUSTRALIAN Education Institutions in the past 12 months.

ELICOS:

VET:

Higher Education:

Others (please specify):

COMPANY DESCRIPTION

Provide a description of your company. If your company is new to the AUSTRALIAN market, please briefly state your marketing strategies for this market.

GENERAL

Are you an authorised agent or member of an agent's association? If so, please list.

Have you ever been refused representation by an education provider in Australia? If so, please provide details of that provider and the current circumstances of the refusal.

What Qii courses do you intend to provide to prospective students? What marketing methods will you engage?

How many students do you intend to recruit to study at Qii in the next 12 months?

What courses from other providers do you currently place students in? e.g. Nursing, Accounting etc.

Do you charge your prospective students an Agent's Service Fee? If so, how much do you charge? Please list all the Services included in this fee.

**AUSTRALIAN EDUCATION REFEREES. *Provide a minimum of two (2).
If you are unable to provide 2 Referees from Australia, please list from other countries.**

REFEREE 1			
COMPANY NAME			
CONTACT PERSON		POSITION	
WEBSITE			
EMAIL		PHONE	
REFEREE 2			
COMPANY NAME			
CONTACT PERSON		POSITION	
WEBSITE			
EMAIL		PHONE	
REFEREE 3			
COMPANY NAME			
CONTACT PERSON		POSITION	
WEBSITE			
EMAIL		PHONE	

AUTHORISATION

Authorisation for processing			
Action to be taken:	APPROVED		DENIED
Date effective:			
Comments:			
Signed		Position	
Print name		Date processed	