

AGENT APPLICATION FORM

For consideration to be appointed as certified agent of Yarra College Australia to assist the college in the selection of agents, please complete this form and return it by email to: info@yarracollege.vic.edu.au

Note: completion of this application form will not make you an agent of Yarra College Australia, but will enable the college to consider appointing you as such.

Company/Business Name			
Trading Name (if different):			
ABN or ACN (if any)			
Company/Business Street Address			
Company/Business Postal Address			
Names of all Directors			
Name of Registered Owner/Principal			
Name of Chief Executive Officer (if different)			
Phone		Moblie	
Email			
Website			
Agent's Migration Agents Registration Number (If an agent is Registered Migration Agent)			
Following Information of Agents' Employees (If Any) who are involved in facilitating an Enrolment			

Name	Email Address	Migration Agent Registration Number (If registered with OMARA)

Company information:

How long has your company been in existence?

Branches:

Description of your major business activities:

Services provided to students:

Number of students sent abroad per year:



Countries students are sent from:

Institutions / Colleges currently representing:

Services provided to institutions:

What professional associations are you a member of? ;

Number of students you estimate to recruit for Yarra College Australia over the next 12 months:

Have you ever had a previous education agent agreement cancelled by a RTO? Yes No

Please provide us with a sample or your organisation's promotional materials and advertisements (English and any other applicable languages)
- attach the documents (if available)



Please attach the following to your application:

- Business Registration Certificate
- Copy of your company profile
- Samples of marketing material distributed by your agency
- Copy of Register of company
- Copy of register of directors
- Copies of key directors and employees qualifications

PLEASE PROVIDE CONTACT DETAILS OF TWO REFEREES (Preferably Australian education providers or alternatively, business referees):

*Please Note these referees will be contacted.

Name: _____

Name: _____

Position: _____

Position: _____

Organisation: _____

Organisation: _____

Street Address: _____

Street Address: _____

Postal Address: _____

Postal Address: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

PLEASE READ THE FOLLOWING CAREFULLY:

- I/ We understand that submitting this ‘Agent Application Form’ to Yarra College Australia, does not grant or guarantee registration as an agent for recruiting domestic and / or international students. Yarra College Australia reserves the right to cease all business dealings with me / us if we mislead prospective students or misrepresent Yarra College Australia as authorised agents or representatives of Yarra College Australia.
- I/We prepared to enter into an agreement with Yarra College Australia
- All the information provided above is true and accurate.
- I am interested in representing Yarra College Australia as an education agent and I agree to do so in an honest and professional manner as per the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students (The National Code) and the ESOS Act 2000
<https://internationaleducation.gov.au/Regulatory-Information/Education-Services-for-Overseas-Students-ESOS-Legislative-Framework/ESOS-Regulations/Pages/default.aspx>

Applicant’s signature:

Name: _____

Position: _____

Signature: _____

Date: _____