



## Education Agent Application Form

Company Details and Background:	
Company / Business Name:	
Trading Name:	
Type of Legal Entity:	
Registered in Australia:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes please provide: ACN: _____ or ABN: _____ If no please provide: Overseas Entity Registration Number: _____
Established Year:	
Name of CEO / Director:	
Registered Head Office Address:	
Business Address:	
Phone:	
Email:	
Website:	
Could you provide a brief overview of your current business operations and activities?	
Number of Staff:	Number of International Offices:
Location(s) of International Offices	



Director and Employee Details:	
<b>Person 1:</b>	
Name:	
Position:	
Qualifications and previous experiences:	
Please list any education agent professional bodies of which you are a member.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes please comment:
<b>Person 2:</b>	
Name:	
Position:	
Qualifications and previous experiences:	
Please list any education agent professional bodies of which you are a member.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes please comment:
<b>Person 3:</b>	
Name:	
Position:	
Qualifications and previous experiences:	
Please list any education agent professional bodies of which you are a member.	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please comment:



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### Please Outline the Potential Markets and Services You Intend to Provide:

What markets are you targeting?

What strategies do you plan to employ to promote our course?

Could you please provide an overview of the support services you offer to prospective students?

Do you impose any fees on students for your services?

Yes    No

If yes, please provide details of the services and relevant fee for each:



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<b>Agency Performance and Compliance:</b>	
How many Australian training providers do you currently represent?	
How many students have you referred to Australian educational institutions in the last 2 years?	
Please provide a brief outline of how you and your organization will fulfill your responsibilities as an education agent in accordance with the National Code 2018. Additional information, such as company flyers, can be attached if necessary.	
Have you or any of your staff completed the Education Agents Training Course (EATC) available through <a href="http://www.pieronline.org">www.pieronline.org</a> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes please list who has completed the course:
Do you possess a thorough understanding of the requirements outlined in the ESOS Act and National Code?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you frequently monitor the websites of the Department of Home Affairs and the Department of Education to stay updated on relevant information?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you agree to adhere to Institute of Management and Computing regulations concerning advertising, course materials, application procedures, and ensure the provision of accurate information to students?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to utilize the marketing materials provided by Institute of Management and Computing to promote our courses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Additional Information:</b>	
Please include any additional information that you believe will strengthen your application.	



## Education Agent Application Form

### References:

Please provide the contact details of at least two references.

#### Institution 1:

Name of Institution:

Contact Person:

Position:

Phone Number:

Email:

Dates of your associations:

Start:

End:

#### Institution 2:

Name of Institution:

Contact Person:

Position:

Phone Number:

Email:

Dates of your employment:

Start:

End:

#### Institution 3:

Name of Institution:

Contact Person:

Position:

Phone Number:

Email:

Dates of your employment:

Start:

End:



### Declaration

In signing this agreement, you declare that

- You have read and understood the extract from the ESOS Act 2000 Obligations of Agents.
- The answers and details provided in this application are true, accurate and complete.
- Institute of Management and Computing Pty Ltd is authorized to contact the referees listed to collect information about my conduct and services.
- You acknowledge and agree to the privacy statement provided below.

**Privacy Statement:** Institute of Management and Computing values the confidentiality of all information collected, used, or disclosed in accordance with the Privacy and Data Protection Act 2014 and relevant legislation. Our comprehensive Privacy Policy, accessible on our website, outlines our commitment to safeguarding your personal information. We may disclose student information to Commonwealth and State agencies as mandated by legal obligations.

Signature:		Date:	
Name:			

**Please submit this form along with the accompanying documents to the representative at the Institute of Management and Computing office. Alternatively, you can send the form and supporting evidence to [agents@imc.vic.edu.au](mailto:agents@imc.vic.edu.au)**