

EDUCATION AGENT APPLICATION FORM

ABOUT THIS FORM

Thank you for your interest in becoming an education agent with Hopkins International College. Once we receive your application, we will acknowledge we have received your application within 3 working days of receipt. If you require any assistance in completing this form, please contact us by phone or email. Please ensure you include the details of two referees who can support your application.

Once we have assessed your application (within 10 working days of receipt), we will be in touch with you in writing regarding the outcome of the application. If the application is approved, we will send you an agreement in writing for signing and you will need to participate in an induction with us thereafter.

You can send this form back to us by post or email.

COMPANY DETAILS

| | |
|---|--|
| COMPANY NAME <i>(legal and trading name)</i> | |
| ACN AND ABN | |
| ADDRESS | |
| WEBSITE ADDRESS | |
| PHONE NUMBER/S | |
| EMAIL ADDRESS | |
| COMPANY OVERVIEW | |

Please provide a summary of the services your company offers, as well as your company structure.

EXPERIENCE

Please outline your experience in recruiting international students. This should include:

- *the number of years you have been in business*
- *the number of providers you currently represent*
- *whether you use any sub-agents*
- *an indication of the geographical areas from which you currently recruit students from*
- *the number of students referred to Australian education institutions in the past three years.*

BENEFITS

Please explain the benefits that your company can offer to us.



REFEREES

| REFEREE 1 | |
|-------------------------|--|
| COMPANY NAME | |
| CONTACT PERSON NAME | |
| CONTACT PERSON POSITION | |
| PHONE NUMBER | |
| EMAIL ADDRESS | |

| REFEREE 2 | |
|-------------------------|--|
| COMPANY NAME | |
| CONTACT PERSON NAME | |
| CONTACT PERSON POSITION | |
| PHONE NUMBER | |
| EMAIL ADDRESS | |

PRIVACY NOTICE

Hopkins International College is required to collect education agents' personal information. This may be shared with the Australian Government as required for the purposes of:

- promoting compliance with the ESOS Act and the National Code;
- assisting with the regulation of Agents;
- promoting compliance with the conditions of a particular student visa or visas, or of student visas generally; or
- facilitating the monitoring and control of immigration.

Information about education agents can also be accessed by all registered providers through PRISMS and includes:

- the outcome of the enrolments
- the percentage of completed CoEs by the education agent
- the number of CoEs created with the education agent's involvement against the total number of CoEs created for the provider.

EDUCATION AGENT DECLARATION

- I declare that the information provided is true and correct.
- I agree to the collection, use and disclosure of my personal information as per the Privacy Notice.
- I understand my responsibilities as an education agent under the National Code 2018 Standard 4 and have a good understanding of the international education system in Australia, including the International Education and Training Code of Ethics.

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|---|--|
| NAME OF EDUCATION AGENT REPRESENTATIVE | |
| EDUCATION AGENT REPRESENTATIVE POSITION | |
| SIGNATURE | |
| DATE | |