International Institute of Training Pty Ltd

AGENT APPLICATION FORM

International Institute of Training Pty Ltd and t/a International Institute of Training (hereby referred to as IIT)

Legal Name:					
Trading Name:					
Contact Name:				**Position:**	
Physical Address:					
Australian Company Number (ACN): *(if applicable)*					
Australian Business Number (ABN): *(if applicable)*					
Australian Migration Agency Number: *(if applicable)*					
Postal address:					
Telephone:		**Fax:**		**Email:**	
Website:					

BUSINESS BACKGROUND

- **How long have you been in business?** ……
- **Number of international students recruited for study in Australia each year:** ……
- **List of other institutions you are currently representing in Australia:**

……

……

- **List of countries you operate from:**

……

……

- **List the courses you promote to enroll students into:**

……

……

- **Names of agent staff involved in recruiting students:**

……

……

- **Services provided to students (Please check in appropriate box)**:

☐ Student counselling ☐ Pre-departure briefing

☐ Visa Application ☐ Follow up with parents

Other services (Please Specify): ……

Do you charge students additional fees for the above services? ☐ Yes ☐ No

If yes, please specify the amount(s) and type(s) of fees charged: ……

How do you promote international education and how will you promote International Institute of Training (IIT)?

……

……

REFEREES

Please indicate two referees from Australian educational institutions that you represent (one mandatory).

Reference 1					
Organisation Name:					
Contact Person:					
Position:					
Address:					
Telephone:		**Fax:**		**Email:**	

Reference 2					
Organisation Name:					
Contact Person:					
Position:					
Address:					
Telephone:		**Fax:**		**Email:**	

International Institute of Training Pty Ltd

As our authorized agent we are responsible for your actions in marketing our courses and therefore we expect you to market them with integrity and accuracy as outlined in the National Code 2018 (National Code of Practice for Providers of Education and Training to Overseas Students 2018) and ESOS (Education Services for Overseas Students Act) 2000. Please confirm that you have read and understood this Act.

Agent Declaration:			
By signing this form, I declare that: • I have read and understood the Education Services for Overseas Students (ESOS) Act 2000 and the National Code of Practice for Providers of Education and Training to Overseas Students 2018 (Standard 4 – Education Agents). • I will act honestly, responsibly, and in the best interests of students and International Institute of Training (IIT). • I will not make false or misleading claims, including guarantees of migration or employment outcomes. • I will disclose to students all fees charged by my organisation for services provided. • I consent to International Institute of Training (IIT) conducting a reference check prior to issuing an agreement.			
Name of Agent:			
Agent's Signature:		**Date:**	

REQUESTED ATTACHMENTS (FOR RTO OFFICE USE ONLY)

Item	Attached (Office Use Only)
Evidence of Business Registration - ABN/ACN	
Agent Qualification - MARA/QEAC	
Reference Check	
Company Profile	

Please refer to Managing Education Agent Kit for guidelines about this form.

Thank you for completing the form. **Please return it to:** Email: info@iitraining.vic.edu.au	**OFFICE USE ONLY**	
	Application Approved:	☐ Yes ☐ No
	Authorised Officer Name:	
	Authorised Officer Signature:	
	Date:	/ /