Approved agent application form

Thank you for your interest in representing the Australasian Academy of Higher Education (AAHE). Please complete this application form if you would like your company to be considered for appointment as an Authorised Education Agent for AAHE, for the purpose of recruiting students to study at the Academy.

Email your completed application to admissions@aahe.edu.au

1. Company details

Type of Legal Entity:

☐ Sole Trader — Name of Proprietor: _____

☐ Partnership — Name of Partner: _____

☐ Incorporated company — Registered Company Name: _____

Company Name/Legal Name: _____

Trading Name (if any): _____

Place of Registration: _____

Date of Registration: _____

QEAC No: _____ MARA No: _____

If registered in Australia, ABN: _____ ACN (if any): _____

Overseas Entity Registration Number: _____

Business Address: _____

Suburb:_____ State:_____ Country: _____ Postcode:_____

Phone: _____ Email: _____

2. Details of key directors and employees

Name: _____ Position: _____

Phone: _____ Mobile: _____ Email: _____

Qualification and previous experience: _____

_____

Name: _____ Position: _____

Phone: _____ Mobile: _____ Email: _____

Qualification and previous experience: _____

_____

Name: _____ Position: _____

Phone: _____ Mobile: _____ Email: _____

Qualification and previous experience: _____

_____

If more space is required, please attach another sheet.

3. Performance

The total number of students you have referred to Australian education institutions over the past 2 years:

Postgraduate courses: _____ Undergraduate courses: _____

Vocational courses: _____ High School & ELICOS courses: _____

Which courses are your clients most interested in? (Please tick relevant boxes)

☐ General English ☐ University Foundation ☐ Undergraduate

☐ Academic English ☐ Vocational Education ☐ Postgraduate

4. Compliance

Have any of your staff completed the Education Agents' Training Course?	☐ Yes	☐ No
If yes, how many? _____		
Do you have a good understanding of the requirements of the Education Services for Overseas Student (ESOS) Act 2000, National Code 2018, and being an Education Agent?	☐ Yes	☐ No
Do you regularly monitor the Department of Home Affairs website and the Department of Education website?	☐ Yes	☐ No
Do you know that students coming to Australia on a student visa must have a primary purpose of studying and must study full time?	☐ Yes	☐ No
Are you an authorised e-Visa agent?	☐ Yes	☐ No
Will you comply with AAHE's requirements regarding advertising, course materials and application procedures, and provide accurate information to students?	☐ Yes	☐ No
Will you only use marketing materials supplied by AAHE to promote AAHE courses?	☐ Yes	☐ No

5. Business profile

Do you have any office / representatives in Australia? If so, please provide the details below:

Company Name: _____

Company Address: _____

Suburb: _____ State: _____ Country: _____ Postcode: _____

Phone: _____ Email: _____

Registration Number: _____ Number of Staff: _____

Others:

_____

Are you a member of any agent association or professional industry body? ☐ Yes ☐ No

If yes, please specify:

_____

6. Representative institutions

	Name of Institution	Contact Person	Phone	Email	Years you have represented this institution	Recruited student numbers
1						
2						
3						
4						

7. Marketing activities

On average, how many students do you recruit from overseas per year?

_____

Who are your major target markets? Do you possess any strengths in those areas?

_____

_____

_____

Please describe the characteristics/trend of your potential market (age, income, educational background, university networks, high school, higher education, etc.)

_____

_____

When is the most effective season of the year to perform marketing activities in your target marketing regions or to cooperate with your marketing recruitment?

_____

_____

Please briefly state how would you plan to recruit students to AAHE

_____

_____

If you are appointed as an agent of AAHE, how many students do you plan to recruit in the first year?

_____

_____

Student Services

What kind of services do you offer to your students?

_____

_____

Do you charge any service fee to students for processing their application?

If yes, please provide details below.

_____

_____

8. Referees

Please provide contact details of at least two people who may act as referees for your firm (including at least one from Australia).

Name: _____ Position and organisation: _____

Phone: _____ Mobile: _____ Email: _____

Name: _____ Position and organisation: _____

Phone: _____ Mobile: _____ Email: _____

Name: _____ Position and organisation: _____

Phone: _____ Mobile: _____ Email: _____

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Name: _____ Position and organisation: _____

Phone: _____ Mobile: _____ Email: _____

9. Agent declaration

I confirm that the information provided on this application is true and accurate to the best of my knowledge. I also authorise the Australasian Academy of Higher Education Pty Ltd to approach my referees to collect the information.

Organisation: _____ Position: _____

Name of the officer: _____

Authorised delegate signature: _____

Phone: _____ Email: _____

Required Documents:

Please attach evidence of your business registration ☐ Attached

10. Privacy disclosure statement

The Australasian Academy of Higher Education is committed to the responsible collection and handling of your personal information in accordance with all relevant legislation, including the Education Services for Overseas Students Act 2000, the National Code of Practice for Providers of Education and Training to Overseas Students 2018 and the Privacy Act 1988. The personal information collected on this form will be used for the purposes of assessing and processing your application. Your personal information may be disclosed to Commonwealth and State Agencies such as the Department of Education and the Department of Home Affairs, pursuant to reporting obligations under applicable legislation. See AAHE Privacy Policy for details, which can be accessed under Policies at https://aahe.edu.au/

10. AAHE OFFICE USE ONLY

Approved by: _____ Agent Agreement Signed: ☐ Yes ☐ No

Date: _____ Evidence of business registration ☐ Yes ☐ No

Comments: