

INTERNATIONAL Education Agent Application



Please complete this form if you wish to be considered for appointment as an education agent for Sheldon College. Please note that completing this form does not result in automatic appointment.

TERRITORY IN WHICH THE AGENCY IS TO OPERATE:

(Insert country or geographic region): _____

AGENT BUSINESS DETAILS:

Company Name (If applicable):	
Registration Number	
Expiry Date	
ABN	
Full Address	
Postal Address	
Email Address	
Phone Number	
Website	

(If the business is not conducted through a registered company, please indicate the nature of the business structure (e.g. sole trader, partnership))

AGENT BUSINESS PROFILE

Number of years in existence: _____

Name of Principal/Owner: _____

Number of Staff: _____

LOCATION AND DETAILS OF OFFSHORE OFFICES

Full address: _____

Postal address: _____

Telephone number: _____

Email address: _____

Website: _____

PAST EXPERIENCE

Please outline below the previous experience you have had (if any) in performing a similar role.

FAMILIARITY WITH AUSTRALIAN EDUCATION INDUSTRY

- Are you familiar with the ESOS Act? Yes/No
- Are you familiar with the National Code? Yes/No
- Have you completed the Education Agent Training Course? Yes/No
- Do you have an understanding of the Australian international education system?
 Yes/No

MARKETS FROM WHICH YOUR AGENCY WILL RECRUIT STUDENTS

State briefly how and where you plan to recruit/refer students to the school:

How many students do you believe you could recruit for the College in the next two years?

How many students have you recruited to Australian schools in the last 12 months?

SERVICES

Please list the ongoing services you will provide to enrolled students and the College:

FEES

Please supply details of any further fees or commission (over and above what the College might pay to you) you charge or intend to charge students for processing applications:

REFEREES

Please provide the name and contact details for three (3) referees:

1. An Australian or New Zealand School
 - a. Name _____
 - b. Phone: _____
 - c. Email: _____
2. Another Australian or New Zealand School
 - a. Name: _____
 - b. Phone: _____
 - c. Email: _____
3. A referee of your choice
 - a. Name: _____
 - b. Phone: _____
 - c. Email: _____

Please include a copy of the Company prospectus or marketing brochures.

Signature:

Printed Name: _____

Signatory's position (E.g. Director): _____

Date: _____

Please email this expression of interest to:

Mrs Rebecca Anthony
International Education Program Manager
international@sheldoncollege.com
Sheldon College

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