

## EDUCATION AGENT APPLICATION FORM

**! Please attach a copy of your business profile with this form.**  
**! For agent's agreement renewal, please complete Main Office Contact Details only and sign the declaration.**

Company Name

Business Name

ABN   
*if available*

### MAIN OFFICE CONTACT DETAILS

Please only fill out this section for renewing agent's agreement.

Contact Name

Position

Company Address (Postal)

Phone & Fax P.  F.

Mobile

Email

Website

### OTHER BRANCHES CONTACT DETAILS

Branch Name (1)

Contact Name

Position

Company Address (Postal)

Phone & Fax P.  F.

Mobile

Email

### REFEREES

Referees Name (1)

Position

Institute

Company Address (Postal)

Phone & Fax P.  F.

Mobile

Email

### AGENT DETAILS

Years in education consultation  years

No. of staff in students section  people

No. of students sent to Australia  students  
*per year*

Main Business

Service provided to students

Accomodation  Airport Pick Up  Other

Australian Institution represented

Countries represented

Have you worked in conjunction with another agent previously?

No  Yes - Please specify

Branch Name (2)

Contact Name

Position

Company Address (Postal)

Phone & Fax P.  F.

Mobile

Email

Referees Name (2)

Position

Institute

Company Address (Postal)

Phone & Fax P.  F.

Mobile

Email

### DECLARATIONS

We are interested in Victory Institute as an Education Agent and we agree to do so in an honest and professional manner.

Name: \_\_\_\_\_ Date: \_\_\_\_\_