

Victory Institute of Vocational Education Pty. Ltd. T/A Victory Institute ABN63 111473404 | CRICOS.02678D | RTO.91161

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	your business profile with this form. newal, please complete Main Office Contact Details only	AGENT DETAILS	S		
_		Years in education	consultation	years	
Company Name		No. of staff in stud	ents section	people	
Business Name		No. of students ser	nt to Australia	students	
ABN if available		per year Main Business			
MAIN OFFICE CO	ONTACT DETAILS	Service provided to	students		
	his section for renewing agent's agreement.	Accomodation		n Other	
Contact Name		Australian Institutio		p Other	
Position		Australian institutio	П тергезептей		
Company Address					
(Postal)		Countries represent	ad		
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Phone & Fax	P. F.				
Mobile		Have vou worked in	conjunction with	another agent provinces	
Email			rked in conjunction with another agent previously?		
Website		○ No ○ Yes - F	Please specify		
OTHER BRANCH	ES CONTACT DETAILS				
Branch Name (1)		Branch Name (2)			
Contact Name		Contact Name			
Position		Position			
Company Address		Company Address			
(Postal)		(Postal)			
Phone & Fax	P. F.	Phone & Fax	Р.	F.	
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Referees Name (1)		Referees Name (2)			
Position		Position			
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Company Address		Company Address			
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Phone & Fax	P. F.	Phone & Fax	Р.	F.	
Mobile		Mobile			
Email		Email			
DECLARATIONS					
	Victory Institute as an Education Agent and we agree to d professional manner.	1			

Name:_

Date: