

EduCo Agent Application Form

* Please forward a copy of your Current Business Profile along with this Agency Agreement Application Form

Company name:

Current EduCo agent? Yes No

If yes, which institutions are you currently representing? Southern Cross University Strathfield College
 Cambridge International College Baystate College University of St. Thomas Arbutus College

Head Office Details:

Contact name:

Position:

Office address:

State/Province/District: Country: Postcode/Zip:

Postal Address (if different):

State/Province/District: Country: Postcode/Zip:

Phone: Fax:

Email(s):

Website:

Agent Information:

Year Agency was founded:

Years in recruitment:

Total number of staff:

Number of students recruited per year:

Number of students recruited to which countries each year:

What other institution do you represent?

Have you worked in conjunction with any other agents?

If yes, what is the name of the other agency(s)?

What services do you offer to students?

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EduCo International Group

Please list other offices that operate under your Agency's name: (Please attach another sheet if required)

Other offices:

Office name: _____

Contact name: _____

Position: _____

Office address: _____

State/Province/District: _____ Country: _____ Postcode/Zip: _____

Postal address (if different): _____

State/Province/District: _____ Country: _____ Postcode/Zip: _____

Phone: _____

Fax: _____

Email(s): _____

Website (if different): _____

Office name: _____

Contact name: _____

Position: _____

Office address: _____

State/Province/District: _____ Country: _____ Postcode/Zip: _____

Postal address (if different): _____

State/Province/District: _____ Country: _____ Postcode/Zip: _____

Phone: _____

Fax: _____

Email(s): _____

Website (if different): _____

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EduCo International Group

Please name two referees from Educational Institutes that your Agency currently represents.

Referee one:

Contact name: _____

Name of Educational Institute: _____

Position: _____

Office address: _____

Phone: _____

Fax: _____

Email: _____

Referee two:

Contact name: _____

Name of Educational Institute: _____

Position: _____

Office address: _____

Phone: _____

Fax: _____

Email: _____

Declaration:

I am interested in representing the below institutions as an education agent and I agree to do so in an honest and professional manner. I declare that the above information I have provided is correct and true.
Please check the appropriate box.

<p>USA</p> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <input type="checkbox"/>  Claremont <small>GRADUATE UNIVERSITY</small> <small>Claremont, California</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  Brandeis University <small>INTERNATIONAL BUSINESS SCHOOL</small> <small>Boston, Massachusetts</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  UNIVERSITY OF Nebraska <small>Lincoln</small> <small>Lincoln, Nebraska</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  UNIVERSITY of ST. THOMAS <small>MINNESOTA</small> <small>St. Paul & Minneapolis, Minnesota</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  Bay State College <small>Boston, Massachusetts</small> </div> </div>					
<p>Australia</p> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <input type="checkbox"/>  <small>In collaboration with</small> Southern Cross <small>University</small> <small>CRICOS Sydney & Melbourne 01241G</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  CAMBRIDGE <small>INTERNATIONAL COLLEGE</small> <small>A U S T R A L I A</small> <small>CRICOS Melbourne 01718J Perth 01459A</small> </div> <div style="text-align: center;"> <input type="checkbox"/>  Strathfield College <small>SYDNEY</small> <small>CRICOS Sydney 02736K</small> </div> </div>			<p>Canada</p> <div style="text-align: center;"> <input type="checkbox"/>  ARBUTUS COLLEGE <small>VANCOUVER • CANADA</small> <small>Vancouver DLI O19219834012</small> </div>		

Name: _____

Signature: _____

Date: _____

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