

Application for International Agency Appointment Representative Profile Form



Please email this expression of interest to:

Ms Michelle Lane
Head of Admissions
m.lane@staidans.qld.edu.au

St Aidan's School Council Ltd
ABN: 31 074 999 527
CRICOS Code: 01194K



St Aidan's
Anglican Girls' School

Please complete this form if you wish to be considered for appointment as an education agent for St Aidan's Anglican Girls' School (**the School**). This application relates to an appointment in the geographic territory shown in this Application and, if accepted by the School, the Agent must sign an International Agency Agreement in the form approved by the School. 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 a company):

Registration No:

Place of Registration:

Date of Registration:

Expiry Date (if applicable):

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

Australian Business Number – ABN (if applicable):

Full Address:

Postal Address:

Email Address:

Telephone No:

Fax No:

Website:

AGENT BUSINESS PROFILE

Number of years in existence:

Name of Principal/Owner:

Background:

Qualifications:

Number of Staff:

Details of key staff members and/or School

consultants:

Name:

Area of Responsibility:

Name:

Area of Responsibility:

Name:

Area of Responsibility:

Name:

Area of Responsibility:

Services provided by the Business:

Location and details of offshore offices:

Full Address: _____
Postal Address: _____
Telephone No: _____ Fax No: _____
Email Address: _____
Website: _____

Location and details of sub-contractors which may be used to provide services to the Business:

Full Address: _____
Postal Address: _____
Telephone No: _____ Fax No: _____
Email Address: _____
Website: _____

Location and details of offshore partners:

Full Address: _____
Postal Address: _____
Telephone No: _____ Fax No: _____
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?	<input type="radio"/> Yes	<input type="radio"/> No
Are you familiar with the National Code?	<input type="radio"/> Yes	<input type="radio"/> No
Are you familiar with the AEI Agent Training Course?	<input type="radio"/> Yes	<input type="radio"/> No

DETAILS OF MARKETS FROM WHICH YOUR BUSINESS WILL RECRUIT

State briefly how and where you plan to recruit/refer students in the relevant territory to the School:

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

From which parts of the relevant territory will the Business recruit potential students for the School?

What are the characteristics of the potential market for the School?

PROFESSIONAL ORGANISATIONS

Please outline the professional organisations of which your Business is a member:

SERVICES

Please outline the services you will provide to the School:

FORECASTS

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

FEES

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

REFEREES

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

a) An Australian Government Officer or Agency

Name: _____ Telephone No: _____
Email Address: _____

b) An Australian or New Zealand School

Name: _____ Telephone No: _____
Email Address: _____

c) A referee of your choice

Name: _____ Telephone No: _____
Email Address: _____

Signature: _____
Printed Name: _____
Signatory's position (eg Director): _____
Date: _____