

AGENT REPRESENTATIVE APPLICATION

In order to assist Wells International College to consider your organisation to become our representative agent, please complete this application form and return it to the Marketing Department with all the support documentation outlined below.

Company Detail			
Company legal name		Trading name <i>if different to legal name</i>	
Australian Business Number (ABN) <i>if applicable</i>		Australian Migration Agency Number (MARA) <i>if applicable</i>	
Name of Authorised Representative		Title of Authorised Representative	
Address			
Country		Email	
Phone no <i>(country code area code)</i>		Website	
Address of overseas branch <i>(if applicable)</i>			
Country		Email	
Phone no <i>(country code area code)</i>		Website	
Company Background			
How long has your business been operating?	<input type="checkbox"/> less than 1 year <input type="checkbox"/> 1-5 years <input type="checkbox"/> 5 years + <input type="checkbox"/> 10 years +		
How many branches do you have?	<input type="checkbox"/> 1 <input type="checkbox"/> 2-3 <input type="checkbox"/> 3 +	The countries/regions covered by your agency?	
Do you have an office in Sydney?	<input type="checkbox"/> Yes <input type="checkbox"/> No	How many staff/student counsellors do you have in each office?	<input type="checkbox"/> less than 5 staff <input type="checkbox"/> 6-10 staff <input type="checkbox"/> more than 10 staff
Do you have internet access at your office?	<input type="checkbox"/> Yes <input type="checkbox"/> No	What advertising media are used to recruit students?	<input type="checkbox"/> catalogue <input type="checkbox"/> newspaper <input type="checkbox"/> student fairs/exhibition <input type="checkbox"/> others; _____
Total number of students recruited by your company to study in Australia over the past 3 years.	Year	Number of students	
	Year	Number of students	
	Year	Number of students	
Do you recruit students for any other countries besides Australia?	<input type="checkbox"/> No <input type="checkbox"/> if Yes, please provide detail	1.	
		2.	
		3.	
List of institutions you are currently representing in Australia?	1.	Number of years	
	2.	Number of years	
	3.	Number of years	
Proven understanding of Compliance and responsibilities under ESOS Act and National Code			

As an Agent there is a requirement to regularly check for updates on the following websites.	<input type="checkbox"/> www.immi.gov.au <i>(aware of Student visa obligation)</i>	<input type="checkbox"/> www.aei.gov.au/AEI/ESOS <i>(aware of your responsibilities as an Agent)</i>
	<input type="checkbox"/> www.wic.nsw.edu.au <i>(aware of policies and marketing promotion)</i>	<input type="checkbox"/> www.studyinaustralia.gov.au <i>(provide the accurate advice to student)</i>
<input type="checkbox"/>	Are you prepared to comply with all requirements of Wells International College in relation to providing accurate and up to date course information to students?	
<input type="checkbox"/>	Are you prepared to only use material supplied by the institute to promote our courses?	
<input type="checkbox"/>	Are you aware that in signing this document you are indicating your understanding of and ability to abide by the content of ESOS Act. www.aei.gov.au/AEI/ESOS	

Referees (please provide the name and contact details of two referees, including one from an Australian University)

1. Name of Institution	2. Name of Institution
Contact person Name	Contact person Name
Position	Position
Contact number	Contact number
Email Address	Email Address

Please sign the declaration below;

- I understand that Wells International College is not under any obligation to accept my application to act as an agent to recruit students on their behalf.
- I understand that if my application to act an agent for Wells International College is successful, I will be required to enter into and abide by a formal agency agreement.
- I confirm that I have the necessary registration, accreditation and permission to act as an agent in all territories I have nominated, and I understand that I must notify Wells International College if any changes occur in the registration status of my agency.
- I consent to Wells International College to contact any of the referees I have nominated.
- I agree that I am willing to have my premises inspected and staff interviewed by Wells International College representatives as part of the process of assessing my organisation suitability to act as a recruitment agent for Wells International College.
- By submitting this application to Wells International College I agree to abide by the terms and conditions in this declaration.
- I confirm that the information provided in this application is true and correct to the best of my knowledge. I have read and understand the information provided by Wells International College.

Name		Position	
Signature		Date	
Support documents checklist	<input type="checkbox"/> Certified copy of any registration attached <input type="checkbox"/> Company profile/brochures attached	<input type="checkbox"/> ABN/ASIC registration attached <input type="checkbox"/> All questions completed in full	
Referee checked by:		Agent Agreement Issue date:	