



Agent Agreement Application Form

BFJ International Studies Pty. Ltd. T/AS Gippsland Institute of Technology

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RTO No: 45698, CRICOS Code: 03921A



Gippsland Institute of Technology

BFJ International Studies Pty Ltd trading as Gippsland Institute of Technology

RTO No: 45698

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Agency Agreement Application Form

* Please forward a copy of your current business profile along with this Application form.

Company Name:

ABN (If Available):

Head Office Details:

Contact name:

Position:

Office Address:

State/Province/District:

Country:

Postcode:

Postal Address (if different):

State/Province/District:

Country:

Postcode:

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 for Australia each year:

What countries do you recruit for?

What other Australian Institutions 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?

How are your services marketed?

Member of any associations?

Other offices

Does your agency have offices in different locations? If so, please provide details. If more than 2 other offices attach details with this application form.

Office one

Contact name:

Position:

Office Address:

State/Province/District:

Country:

Postcode:

Postal Address (if different):

State/Province/District:

Country:

Postcode:

Phone:

Fax:

Email(s):

Website:

Office two

Contact name:

Position:

Office Address:

State/Province/District:

Country:

Postcode:

Postal Address (if different):

State/Province/District:

Country:

Postcode:

Phone:

Fax:

Email(s):

Website:

Other trading names

Does your agency operate under any other trading names? If so, please provide details:

Referees

Please name two referees from Educational Institutes that your agency currently represents including at least one referee from an Education Institute in Australia.

Referee One:

Contact Name:

Name of Institute:

Position:

Address:

Phone:

Email:

Referee Two:

Contact Name:

Name of Institute:

Position:

Address:

Phone:

Email:

DECLARATION: I am interested in representing Gippsland Institute of Technology as an education agent and I agree to do so in an honest, ethical and professional manner. I declare that the information I have provided in this application is correct and true.

Name:

Position:

Organisation:

Date: