



Please complete this form if you wish to be considered for appointment as an education agent for Toowoomba Anglican 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 Agent Agreement for Education Agents 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 Number: | |
| 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 Business Address: | |
| Postal Address: | |
| Email Address: | |
| Telephone Number: | |
| Fax Number: | |
| 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: | |
| Location and details of offshore offices: | |
| Full Business Address: | |
| Postal Address: | |
| Email Address: | |
| Telephone Number: | |
| Fax Number: | |
| Website: | |
| Location and details of sub-contractors which may be used to provide services to the Business: | |
| Full Business Address: | |
| Postal Address: | |
| Email Address: | |
| Telephone Number: | |
| Fax Number: | |
| Website: | |
| Location and details of offshore partner: | |
| Full Business Address: | |
| Postal Address: | |
| Email Address: | |
| Telephone Number: | |
| Fax Number: | |
| Website: | |

Past Experience:

Please outline below the previous experience you have had (if any) in performing a similar role:

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| |
|--|



Familiarity with Australian Education Industry (please tick):

| | YES | NO |
|--|-----|----|
| Are you familiar with the ESOS Act? | | |
| Are you familiar with the National Code? | | |
| Are you familiar with the ICEF Academy Educational Agent Training Course (EATC)? | | |

Details of Markets from which you 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 you) you charge or intend to charge students for processing applications:

Referees:

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

1) An Australian Government Officer or Agency

| | |
|-------------------|--|
| Name: | |
| Telephone Number: | |
| Email Address: | |

2) An Australian or New Zealand School

| | |
|-------------------|--|
| Name: | |
| Telephone Number: | |
| Email Address: | |

3) A referee of your choice

| | |
|-------------------|--|
| Name: | |
| Telephone Number: | |
| Email Address: | |



Confirmation of Details Provided:

Please complete:

| | |
|---------------------------------------|--|
| Signature: | |
| Printed Name: | |
| Signatory's Position (e.g. Director): | |
| Date: | |

- Please attach a copies of the Company prospectus and/or marketing brochures.
- Please email this expression of interest to: Head of Admissions – enrolments@taschool.qld.edu.au
- Ensure the application form has been signed and dates above.