

EDUCATION AGENT APPLICATION FORM



ABOUT THIS FORM

Thank you for your interest in becoming an education agent with Pegasus International College. Once we receive your application, we will acknowledge we have received your application within 2 working days of receipt. If you require any assistance in completing this form, please contact us by writing to Admin@Pegasus.edu.au. Please ensure you include the details of two referees who can support your application.

Once we have assessed your application (within 5 working days of receipt), we will be in touch with you in writing regarding the outcome of the application. If the application is approved, we will send you an agreement in writing for signing and you will need to participate in an induction with us thereafter. You can send this form back to us by emailing on Admin@Pegasus.edu.au.

<u>COMPANY DETAILS</u>			
Company name (legal and trading name)			
ACN and ABN			
Address			
Website address			
Phone number/s			
Email address			
Business Activities		Years in Existence	
Migration Agent Registration Authority Number (MARA)			
Experience <i>Please outline your experience in recruiting international students. This should include:</i> <ul style="list-style-type: none">the number of providers you currently representan indication of the geographical areas from which you currently recruit students from			

DETAILS OF KEY DIRECTORS AND EMPLOYEES

TITLE		NAME		POSITION	
QUALIFICATIONS AND PREVIOUS EXPERIENCE					

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PLEASE COMPLETE THE FOLLOWING INFORMATION

The total number of students referred to Australian education institutions over the past 2 years			
High School and ELICOS Courses		Vocational Course	
Undergraduate Course		Post Graduate Course	

PRIVACY NOTICE

Pegasus International College is required to collect education agents' personal information. This may be shared with the Australian Government as required for the purposes of:

- promoting compliance with the Standards of RTO 2015.
- assisting with the regulation of ASQA.

EDUCATION AGENT DECLARATION

- I declare that the information provided is true and correct.
- I agree to the collection, use and disclosure of my personal information as per the Privacy Notice.

Name of education agent representative	
Education agent representative position	
Signature	
Date	