

Education Agent Application Form

(This form is mandatory and need to be uploaded while registering online)

Agency Details

Legal company name	
Trading name (if applicable)	
Country of company registration	
Company registration number (ACN & ABN if registered in Australia)	
Date of establishment	
Registered company address	DOLPH BUSINESS SCHOOL
Contact numbers: Office and Mobile	
E-mail address	
Website URL	
Main Contact person name and position	
Main Contact person's MARA or QEAC Number	



Section 1: Company Description

Please provide a description of your company

Section 2: Key Personnel

Please provide an overview of the key personnel within your company (attach additional pages a	as
required)	

Name 1	DOL Position	
Background	BUSINES	SS SCHOOL
Name 2	Position	
Background		



Section 3: General					
Are you an authorised agent or member of an agents' association? Are you accredited or registered with any organisation or body? If so, please list the name of the associations.					
What services do you provide or intend to provide to our prospective students?					
What are the countries f	rom where you source studer	its?			
DOLPH					
Do you charge student any fees and charges? If so, what do you charge and why?					
Section 4: Referees – please provide two Education Institutional referees					
Referee 1					
Name & Designation					
Name of Institution and Address					
Phone number		Fax number			
E-mail address		Website			



Referee 2			
Name & Designation			
Name of Institution and Address			
Phone number		Fax number	
E-mail address		Website	
Section 5: Acknowled	gement		
I acknowledge that:		ГП	
	on provided in this form is true a	nd accurate; and	CHOOL
	ngaged in dishonest practices.		
	ave read and understood:		
 National Code of Practice for Providers of Education and Training to Overseas Students 2018 			
 The Education Services for Overseas Students Act 2000 (ESOS Act) 			
Education Agent Witness			
Name		Name	
Position		Position	
Signature		Signature	
Date		Date	



ADMIN USE ONLY							
Authorisation for Processing							
Action to be take	n		APPROVED			DENIED	
Date Effective							
Comments							
Signed				Position			
Print Name				Date Process	ed		
			DOL BUSI		SSC	HOOL	