

EDUCATION AGENT APPLICATION FORM

Instructions:

- 1. This form should be completed by an education agent or its representative who wish to engage with and represent the Riverdale Institute.
- 2. Please email at info@riverdaleinstitute.edu.au, the completed form along with the documents that supports your application.
- 3. Please ensure that you have read and understood Riverdale Institute's Education Agent Policy and Procedure available on our website: www.riverdaleinstitute.edu.au.
- 4. For any queries regarding this matter, please email info@riverdaleinstitute.edu.au or call on 1800 902 480.

Company Name	
Trading Name	
Australian Business Number (ABN)	
Australian Company Number (ACN)	
Office Address	
Email	
Work Phone	
Mobile	
Representative Full Name	
Representative Position	
Migration Agent Registration Authority Number (MARN) / QEAC (if applicable)	
Number of years the business has been providing its services as an Education Agent	
Number of International Students recruited for study in Australia in last 3 years	
List of the institution you are currently representing in Australia	STITUTE OF THE STATE OF THE STA
List the courses you usually promote RTO	OO: 45754 CRICOS CODE: 03949M
List of Countries you operate in	
What services do you provide to the international students?	
Do you charge students additional fees for the above services?	



Section B: Referee Details

Please indicate two (2) referees from the Australian educational institutions that you represent.

Reference 1	Ref	erence 2			
Organisation Name	Orgo	anisation Name			
Contact Person	Con	tact Person			
Position	Posi	tion			
Address	Add	ress			
Mobile/Phone	Mob	ile/Phone			
Email	Emo	iil			
Section C: Checklist & Declaration Checklist: Your application will be assessed on the quality of the supporting documentation you provide, so please be as thorough as possible					
0	Have you completed all relevant sections of this application form?				
0	Have you included in you <mark>r appl</mark> ication, a copy of your company profile?				
0	Have you provided your ABN, and Business Registration Documentation?				
0	Have you provided a copy of your professional or industry membership documentation?				
0	And other supporting document				
Agent's Declaration I understand and agree to the following: My personal information will be recorded in PRISMS and ASQAnet. My personal information will be sent to the regulatory bodies like ASQA and can be shared with Australian Government's Department of Education, the Department of Employment and Workplace Relations, Department of Home Affairs (DHA) and other Commonwealth agencies. The information may include but not limited to my organisation details, representative name's business email, phone number and office address. The information will be used to administer or monitor compliance with the Commonwealth legislation e.g. Education Services for Overseas Students Act 2000, ASQA's SRTOs 2015, ASQA's guidelines and Migration Act 1958. I acknowledge that the institute may be required by ASQA to furnish a fit and proper declaration regarding the agent responsible for recruiting students for the institute. I consent to collaborate with the institute in completing ASQA's fit and proper declaration, if necessary. I confirm that all the information provided to the Institute by me through this form and other means is true and correct. Agent's Name:					
Agent's Signature:		Date:			