

In order to assist the Institute of Health and Nursing Australia (IHNA) in the selection of agents to represent us, please complete this form as comprehensively as possible and return it to IHNA - enquiry@ihna.edu.au. Completion of this application will not make you an agent of IHNA but will enable IHNA to consider appointing you as such. It is recommended that the agent should go through the "Education Agents Manual" before signing the Agreement.

COMPANY BACKGROUND			
Registered Company Name:			
Legal Company Name:			
Official Website:			
Head Office Address:			
Phone:		Email:	
ABN (Australia):		ACN (Australia):	
<i>if not an Australian business:</i>			
Registration Number (Offshore):			
<i>A copy of the company registration certificate and company profile must be attached</i>			
Details of Registered Owner:			
Given Name(s):		Surname:	
Phone / Mobile:		Email:	
<i>Branch Office Details: please add separate sheets if more branches available</i>			
Contact Name:		Position:	
Address:			
Phone:		Email:	
Contact Name:		Position:	
Address:			
Phone:		Email:	

Description of core business:	
Number of years in existence:	
Number of students referred to Australian educational institutes over the past 3 Years and Countries that your business has recruited students from:	
Existing number of staff:	
Head Office: _____ Branch Offices - if applicable: _____	
Please list any other Institute / University / Educational institute you are currently representing in Australia or other countries: please use separate sheets if necessary	
Are you a member of any professional associations and networks that promote and support best practice in the recruitment of international students? If so, list below:	
Have you completed The Education Agents Training Course (EATC)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Australian Government recommends that you consider successful completion of the online EATC as a requirement for any education agents who want to represent IHNA. http://eatc.onlinetrainingnow.com/courses/education-agent-training-course	

Are you in the ACPET Preferred Agent List?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a MARA (Migration Agents Registration Authority)?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, MARA Number:
Please list all staff who have completed the Education Agent Training Course. <i>Please use separate sheets if necessary.</i>			
Name:		Position:	
Date qualification awarded:		QEAC Number:	
Name:		Position:	
Date qualification awarded:		QEAC Number:	
Understanding of and Complying with ESOS requirements			
Have you read the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students (the National Code)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
What do you think are the main responsibilities of Agents under the National Code?			
How will you comply with these obligations?			

Description of Potential Market

From which geographical area will your potential market come? List markets:

Please describe any strengths you have in these regions to justify your choice. You MUST include Marketing Strategies.

Please outline any support services you can offer to students wishing to avail themselves of your services.

What is the most suitable time of the year for an IHNA staff member or their representative to conduct a marketing visit to your region and / or an office visit in order to assist you in the recruitment of students?

list the names of three Australian Education Providers referees and include their contact details not related to you, who can verify your track record and your company's financial standing:

**Please provide information in CAPITAL LETTERS only*

Note: This section is mandatory in order to proceed with your application

1. Institution Name:

Contact Name and position:

Phone:

E-mail:

2. Institution Name:

Contact Name and position:

Phone:

E-mail:

3. Institution Name:		Contact Name and position:	
Phone:		E-mail:	
Agent Declaration			
I confirm that I have a clear understanding of the Australian visa conditions by the DIBP (http://www.homeaffairs.gov.au)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you read IHNA international student handbook available in our website: http://www.ihna.edu.au			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand that students coming to Australia on a student visa must have a primary purpose of studying and must study full-time?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand that you must not make any representations or offer any guarantees about achieving residential status in Australia, but that you can refer students to the DIBP website?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prepared to comply with all requirements of IHNA about advertising and course materials, application procedures and providing accurate information to students?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prepared only to use material supplied by IHNA to describe its courses and monitor the IHNA website to ensure that it is current?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand that you cannot commit the IHNA to accept any prospective students into any course at the Institute?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to arrange booking for the IELTS, TOEFL or equivalent tests in accordance with the Australian student visa regulations if required?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Agent Contact Name:		Position:	
Date:		Signature:	

Please attach separate sheets to provide any other information you consider to be of importance to this application.