

## **Agent Application Form**

Name of Agency			
Director's Name			
Phone		Fax	
Email			
Person in charge			
Phone		Fax	
Email			
Registered address			
ABN no.			
MARA no.			
When was your company e	stablished?		
How many educational con	sultants do you have?		
What nationalities do you r	nainly deal with?		
Do you have an office overs	seas? If you do, please wri	te the address and number	r below.
How did you hear about us?			

Please provide at least 2 colleges or institutions, who can give your company a reference. Please write the name and contact details of your referees.

	Referee name	Institution	Contact email	Phone
Referee 1				
Referee 2				



Alternatively, please provide the evidence of **Business Partnerships and Affiliations i.e., Certificate of Agency Agreement** with 2 Australian educational institutions, with whom you are accredited or work (e.g. University, TAFE, and Private Colleges):

Please list the Institutions:

2.

I confirm that all the given information is correct.

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Please e-mail the completed form to <a href="mailto:marketing@ashley.nsw.edu.au">marketing@ashley.nsw.edu.au</a>