INNOVERSE
INSTITUTE

RTO Code: 46578 | CRICOS Code: 04463C

EDUCATION AGENT APPLICATION FORM

info@innoverse.edu.au | www.innoverse.edu.au

Unit 8, 1 Watton Street, Werribee, VIC, 3030, AUSTRALIA

Innoverse Institute Pty. Ltd.
T/A Innoverse Institute ABN: 53681927766

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Instructions:

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

SECTION A: COMPANY DETAILS & BACKGROUND

Company 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

List the courses you usually promote

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

Organisation Name

Contact Person

Position

Address

Mobile/phone

Email

Reference 2

Organisation Name

Contact Person

Position

Address

Mobile/phone

Email

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.

- ☐ Have you completed all relevant sections of this application form?
- ☐ Have you included in your application, a copy of your company profile?
- ☐ Have you provided your ABN, and Business Registration Documentation?
- ☐ Have you provided a copy of your professional or industry membership documentation?
- ☐ And other supporting document

AGENT'S DECLARATION

I agree to the personal information being:

• Recorded in PRISMS and sent to other regulatory bodies like ASQA. This may include my organisation details, representative name's, business email, phone number and office address.
• Accessed by the Australian Government Department of Education and Training, Department of Home Affairs and other Commonwealth agencies that access PRISMS.
• Used to administer or monitor compliance with the Commonwealth legislation e.g. Education Services for Overseas Students Act 2000, Migration Act 1958; and
• Disclosed by the Australian Government Department of Education and Training to other Australian Government entities (including, but not limited to ASQA), education institutions and to public. The Australian Government Department of Education and Training will share individual agents' performance to public as aggregated data (but will not identify agent – provider relationships). Agent-provider relationships will only be identified when data is shared with education providers and other Australian Government entities.

- ☐ I confirm that all the information provided to Innoverse Institute by me through this form and other means is true and correct.
- ☐ I also agree to the authenticity of the personal information that the Australian Government Department of Education and Training currently hold in PRISMS regarding myself and any other personal information that the department may collect in future being disclosed as described above.
- ☐ Innoverse Institute is authorised to contact the referees listed to collect information about my conduct and services.

Agent's Signature:

Agent's Name:

Date: