AGENT APPLICATION FORM





CRICOS 03457J



CRICOS 03799J

WELLS INTERNATIONAL COLLEGE

CRICOS 01856K



WARWICK



CRICOS 02607G

HOW TO APPLY

Please return the completed form with supporting documents to info@timesedu.com.au

Please note Agent agreement may take up to 2 weeks from the submission of this form.

CONTACT US

Level 5, 8 Quay Street, Haymarket, NSW 2000 T:+61(2) 8316 9900 www.timesedu.com.au

Company Details						
Company Name	ipany Name			Director(s)		
Australian Business Number(Al /or Company Registration Num			Australian Migration Agency Number (if applicable)			
Address			Suburb	State	Postcode	
Phone			Mobile			
Email			Website			
Company Status	& Background					
How long has your business be	een operating?					
List institutions you are currentl	y representing in Australia:					
1.						
2.						
3.						
How do you promote internation	al education and how will you	promote our college?				
Onshore	Offshore	Others				
The countries/regions covered	by your company					
What is the projected number c	of students you plan to send ir	the next six months?				

List the most popular courses you promote now

Referees Position Company 1. Name Contact Number Email Position Company 2. Name Contact Number Email Name of Signature of Director(s) Director(s) Date (DD/MM/YYYY) **Offical Use Only** Agent Agreement Prepared by Date (DD/MM/YYYY)