

Add: Suite 145, 416 Pitt St., Sydney NSW 2000 TEL: 1300 769 588

Email: admission@tacis.edu.au
www.tacis.edu.au

TACIS Education Agent Application Form

Part 1: Business Profile

Please provide a copy of your business profile and attach associated documentation.

	T		
Registered Company Name			
Trading Name (if applicable)			
Name of			
Proprietors or			
Directors:			
Years Established			
Address In Australian (if			
applicable)			
Business Address Overseas			
(if applicable)			
Principal Contact Name:			
Qualifications held			
by the Contact			
Person:			
Telephone:		Mobile Number:	
Main Email		Other email:	
Website:			

This document contains our 'Education Agent Code of Conduct' which we have developed to outline a set of base guidelines governing the responsibilities and accountabilities of each party to the relationship. This document should be read in conjunction with the Education Agents Agreement. These documents outline our responsibilities in contributing to the rights of all stakeholders.



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Part 2: Questionnaires

The following questions have been developed to enable us to complete the assessment of your application, please answer the following questions and provide documented evidence where requested:

1.	1. What services does your business provide?					
2.	2. Are you a member of an agent's association in your country or Australia? Provide details.					
	,					
3.	3. Provide a list of your staff including their positions and interactions with potential students.					
4.	What is your estimate next 3 years?	ate of the number of students your company could successfully refer to TACIS over the				
5.	5. Has your company ever had its agreement terminated with any Registered Training Organisation or Higher Education Institution? If YES, provide details below					
6.		you and your staff keep up to date with legislation relevant to the International lia? (ie ESOS Act, ESOS Regulations, National Code 2018, Standards for RTO's 2015)?				
		,				
7.	Is your company aff	iliated with any other businesses (for example migration agents)?				
Yes		No				
If "Y	ES", please specify:					
8. What are the source countries of the students that your organization are going to refer to TACIS?						



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Part 3: Referees

Please provide two (2) referees that we may contact to verify your business services, must be current education providers you deal with in Australia:

Name of Referee 1	Position	
Name of	Contact	
College/Organization	Email	
Contact Phone	Address:	
Name of Referee 2	Position	
Name of Referee 2 Name of	Position Contact	

Part 4: Documents Attached

Name of Documents	Attached	Comments
Company registration document		
Business name registration document		
Migration Agent Registration (if applicable)		
Education Agent Registration (if applicable)		
Other documents (if relevant)		

Part 5: Applicant's Declaration:

I confirm that the information provided in this application is true and accurate to the best of my knowledge. I authorize TACIS to contact my referees to collect information/details as required.

Name	Position	
Signature	Date	

Please note:

Please submit the completed form to info@tacis.edu.au and the Application will be processed within 5 working days from date of receipt of this application.