



## APPLICATION TO BECOME A REPRESENTATIVE/AGENT OF AUSTRALIAN PACIFIC COLLEGE (APC) & SOUTHERN CROSS HIGH SCHOOL (SCHS)

If you would like APC/SCHS to consider you or your company to act as an authorised student recruitment representative/agency, please complete the form and return it to APC/SCHS by fax/mail/email with the relevant supporting documents. Thank you.

### COMPANY INFORMATION

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Post/Zip Code: \_\_\_\_\_

Telephone #:(     ) \_\_\_\_\_ Fax #:(     ) \_\_\_\_\_

Website: \_\_\_\_\_ Email: \_\_\_\_\_

*This Section is Compulsory for all **Local Agents** (where the registered head office is in Australia)*

ABN Number: \_\_\_\_\_ MARA #: \_\_\_\_\_

### CONTACT PERSON INFORMATION

Title: \_\_\_\_\_ Gender:  Male  Female

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Position/Job Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Tel #:(     ) \_\_\_\_\_ Extension: \_\_\_\_\_

*Please include country and area codes, as applicable*

<i>Kent St Campus (CBD):</i>	Lower Ground, 189 Kent St Sydney, 2000	☎ (61 2) 9251 7000	♦ Fax: (61 2) 9251 7575
<i>Clarence St Campus (CBD):</i>	Level 3, 123 Clarence St Sydney, 2000	☎ (61 2) 9262 3222	♦ Fax: (61 2) 9262 3388
<i>Manly Beach Campus:</i>	48-52 Sydney Road, Manly Beach, 2095	☎ (61 2) 9976 2122	♦ Fax: (61 2) 9976 2188
<i>Bondi Junction Campus:</i>	1/100 Ebley St, Bondi Junction, 2022	☎ (61 2) 9389 9755	♦ Fax: (61 2) 9389 9766
	New South Wales	e-mail: <a href="mailto:info@apc.edu.au">info@apc.edu.au</a>	
	AUSTRALIA	Internet: <a href="http://www.apc.edu.au">www.apc.edu.au</a> / <a href="http://www.schs.nsw.edu.au">www.schs.nsw.edu.au</a>	

## OVERSEAS REPRESENTATIVE OFFICE (IF APPLICABLE)

Company Name: \_\_\_\_\_

Contact person: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_

Town/ Town/City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Post/Zip Code: \_\_\_\_\_

Phone no: \_\_\_\_\_ Fax no: \_\_\_\_\_

Mobile#: \_\_\_\_\_ Email: \_\_\_\_\_

## BANK DETAILS

Bank Name: \_\_\_\_\_

Branch Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town/ Town/City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Post/Zip Code: \_\_\_\_\_

Account Name: \_\_\_\_\_

Account Number: \_\_\_\_\_ SWIFT Code: \_\_\_\_\_

## AGENCY UNDERTAKING

I agree to provide accurate advice to APC/SCHS applicants regarding the course, admission requirements, visa requirements, study options as well as assistance with applications, travel arrangements and pre-departure information.

Additionally I agree to always abide by my duties as required by the ESOS Act 2000 and the National Code 2007 < <http://aei.dest.gov.au/AEI/ESOS/NationalCodeOfPractice2007/default.htm> > requirements by not:

1. Engaging in dishonest practices, including suggesting to overseas students that they come to Australia on a student visa with a primary purpose other than full-time study (Section 49.1)
2. Facilitating the enrolment of overseas students who do not comply with the conditions of their student visas (Section 49.2)
3. Engaging in false or misleading advertising and recruitment practices (Section 49.3)
4. Using PRISMS to create eCoEs for other than bona fide students (Section 49.4)

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ADDITIONAL INFORMATION (Compulsory)

### Please provide:

1. A short profile of the company, how long it has been in operation, main nationalities of student target market, key staff contact.
2. A copy of your Business Registration Certificate.
3. A copy of your Passport or other identifying document with your photo (Driver's license etc..)
4. Australian Business Number (ABN) and MARA registration number - (COMPULSORY for Local Agents only).
5. At least two references from Australian registered training organisations (Institution name and contact details including email and telephone numbers) if you have been in operation for 6 months or more.