|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Before you fill in the form  * Type your answers or use clear, printed writing. * Attach extra documents if your answer/s don’t fit into the space provided. * Please email the completed application to [internationalservice@education.nt.gov.au](mailto:internationalservice@education.nt.gov.au) * If you have any queries regarding the application, please email to [internationalservice@education.nt.gov.au](mailto:internationalservice@education.nt.gov.au). | | | | |
| Fields marked with asterisk (\*) are mandatory. | | | | |
| Section 1 – Company details | | | | |
| Company name\* |  | | | |
| Primary office street address\* |  | | | |
| Primary office postal address\* |  | | | |
| ABN/CAN number\* |  | | | |
| MARN/other no \* |  | | | |
| Section 2 – Primary contact | | | | |
| **Name of primary contact for the application**\* |  | | | |
| **Position in company**\* |  | | | |
| **Best contact no. including country code**\* |  | | | |
| Email\* |  | | | |
| Section 3 – Company profile | | | | |
| **Briefly describe the company, number of employees, office locations and services provided**\* |  | | | |
| **What other Australian education organisations does your company represent as an education agent?** \* |  | | | |
| Approximately how many international students does the company recruit to Australian schools annually? \* |  | | | |
| How many international students might be the company recruit to Northern Territory Government schools annually? \* |  | | | |
| Section 4 – Company bank details (For transfer of commission payments) | | | | |
| **Bank name**\* |  | | | |
| **Branch name**\* |  | | | |
| **Branch address**\* |  | | | |
| **Account name**\* |  | | | |
| **Account number**\* |  | | | |
| **SWIFT Code or Sort Code**\* |  | | | |
| Section 5 – Referees (Choose one of the following two options to support your application) | | | | |
| **OPTION 1: Attach to this application short, signed supporting statements from two Australian education organisations your company represents**  **OR**  **OPTION 2: Complete the table below giving approval for the Department of Education to contact two supporting Australian education organisations** | | | | |
| **Name of organisation 1**\* |  | | | |
| **Contact person’s name**\* |  | | | |
| Contact’s position in the institution\* |  | | | |
| Telephone\* |  | | | |
| Email\* |  | | | |
| **Name of organisation 2**\* |  | | | |
| **Contact person’s name**\* |  | | | |
| Contact’s position in the institution\* |  | | | |
| Telephone\* |  | | | |
| Email\* |  | | | |
| Declaration (Please sign to authorise your application) | | | | |
| I agree, on behalf of all officers and our companythat we are bound by the provisions of the *Education Services for Overseas Students Act 2000* (ESOS Act) and will comply with standards set out in the National Code of Practice for Providers of Education and Training to Overseas Students (2018). | | | | |
| **Name of authorised company representative**\* | |  | | |
| **Signature of applicant**\* | |  | **Date**\* |  |