



QUESTIONNAIRE FOR AGENTS APPLYING TO BECOME A REPRESENTATIVE

Phoenix Academy Partners are:

Curtin University of Technology • Edith Cowan University • Murdoch University • University of Western Australia • CQ University
• Monash University • APSI • DNA Kingston • EIT • La Trobe University • Bond University • Western Australia Department of
Education • TAFE Western Australia • Independent Boys and Girls High Schools

COMPANY DETAILS

1. Business Name: _____
2. Office Address: _____

3. Contact Name: _____
4. Telephone: _____ Mobile: _____ Fax: _____
5. Email: _____ Website: _____
6. Do you have additional office branches? Office address: _____

7. If you have a business in Australia, please supply us with your ABN number: _____

COMPANY BACKGROUND

1. Years in business as an education agent: _____
2. Is your office involved with any other business? If yes, please outline: _____

3. Is your business a member of any professional or marketing organisation? Yes No
If yes, please list 1. _____ 2. _____
4. Does your office act as a subcontractor to another agency? Yes No
If yes, please name the agent: _____
6. Approximately how many students do you send to the following countries each year?
U.K _____ U.S.A _____ Canada _____ Australia _____ Other _____
7. For Australian enrolments, how many students do you send to each of the following sectors?
Number for ELICOS: _____ Number for Foundation Studies: _____
Number for Diploma Studies: _____ Number for Secondary Education: _____
Number for TAFE: _____ Number for University: _____
9. Which Universities do you work with in Australia? _____

10. Do you have a current representative agency agreement with any of the following institutions?

1. Murdoch University?	Yes <input type="checkbox"/> No <input type="checkbox"/>	6. TAFE WA?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Curtin University?	Yes <input type="checkbox"/> No <input type="checkbox"/>	7. WA Government High Schools?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Edith Cowan University?	Yes <input type="checkbox"/> No <input type="checkbox"/>	8. Monash University?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. University of WA?	Yes <input type="checkbox"/> No <input type="checkbox"/>	9. Bond University?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. CQ University?	Yes <input type="checkbox"/> No <input type="checkbox"/>	10. La Trobe University?	Yes <input type="checkbox"/> No <input type="checkbox"/>

11. Have you used Simplified Student Visa Framework (SSVF)? Yes No
If Yes, how many successful SSVF applications have you lodged? _____

Have you received any SSVF rejections? Yes No

12. Please estimate the number of students you can recruit in a given year to Phoenix Academy

Number for ELICOS: _____ Number for Foundation/Diploma Studies: _____

Number for Secondary Education: _____ Number for TAFE/University: _____

STAFF

1. Number of staff in your company: _____ Counsellors: _____ Administrative staff: _____

2. Have any of these staff studied/worked in Australia? Yes No

3. If yes, please provide details: _____

4. Have you or any of your counsellors ever visited Perth? Yes No

5. If yes, when was the date of their last visit? _____

COMPANY SERVICES

1. How much is your student service fee? _____

2. Does this include the fee for an Australian student visa? Yes No

3. If no, what is the fee for obtaining the visa? _____

4. Please indicate the services your company provides:

Student counselling	<input type="checkbox"/>	Follow up with parents	<input type="checkbox"/>
Collecting fees	<input type="checkbox"/>	English Testing	<input type="checkbox"/>
Pre-departure briefing	<input type="checkbox"/>	Visa application	<input type="checkbox"/>
Others	<input type="checkbox"/>	Please specify: _____	

REFEREES

Please indicate two referees we can contact, including one from an **Australian** institution you represent.
(Failure to complete this section will result in delays and/or the rejection of agent applications)

Referee Name: _____ Referee Name: _____

Company: _____ Company: _____

Email: _____ Email: _____

Fax & Phone: _____ Fax & Phone: _____

Year of Representation: _____ Year of Representation: _____

Approx. number of students placed per year: _____
Approx. number of students placed per year: _____

Declaration:

I declare that the information provided in this application is accurate and up to date. I authorise Phoenix Academy to conduct due diligence on the claims made and on the status of the company or individual. I understand that Phoenix Academy is under no obligation to make an appointment as an authorised representative. I also understand that this application in itself does not constitute an appointment as an authorised representative and that any appointment is subject to a formal contracted agreement.

Name: _____ Signed: _____

Position: _____ Date: _____

Please complete this form and return via:

*Fax: International Marketing Officer
+618 9235 6005*

*Email: International Marketing Officer
marketing@phoenix.wa.edu.au*

*Mail: International Marketing Officer
PO Box 256
Leederville, Perth, Western Australia, 6903*

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