

APPLICATION TO BECOME ACMT REPRESENTATIVE

COMPANY INFORMATION

| | | |
|---|---------|------|
| Company Name | | |
| Director's Name | | |
| Company Address | | |
| Company Phone Number (Please include country and area code) | Ph: | Fax: |
| | Mobile: | |
| Email Address | | |
| Web site | | |
| ABN (Australian Business Number) (Overseas agent please provide overseas business number) | | |

MANAGER / IN CHARGE

| | | |
|-----------------------|-----|----|
| Name | | |
| Position/Title | | |
| Contact Detail | Ph: | M: |
| Email | | |

OVERSEAR OFFICE / OTHER BRANCH

| | | |
|---|-----|----|
| Overseas Address (if applicable) | | |
| Person In Charge | | |
| Position/Job Title | | |
| Contact Detail | Ph: | M: |
| Email | | |

OTHER DETAIL

| | |
|--|--|
| Date the agency was established | |
| Nationalities the agency mainly deal with | |
| Courses/Programs of Interest to clients | |
| Membership to industry/organisation (if any) | |

| | |
|---|--|
| Have you completed the AEI (Australian Education International) Education Agent Training Program? | |
|---|--|

REFERENCES

| | |
|-----------------------|--|
| College / Institution | |
| Contact Person | |
| Email | |
| Address/Ph | |

| | |
|-----------------------|--|
| College / Institution | |
| Contact Person | |
| Email | |
| Address/Ph | |

BANK DETAILS

| | | | |
|----------------|--|-----|------------|
| Bank Name | | | |
| Branch Address | | | |
| Account Name | | | |
| Account Number | | BSB | Swift Code |

AGENCY UNDERTAKING

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

I will also ensure that students have received and understood the contents of the ACMT prospectus or read the information on the ACMT website.

I agree to abide by my duties and responsibilities 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:

Engaging in dishonest practise, including suggesting to overseas students that they come to Australia on a student visa with primary purposes other than full time study.

Facilitating the enrolment of overseas student who do not comply with the conditions of their students visas.

Engaging in false or misleading advertising or recruitment practises.

Using PRISMS to create eCoEs for other than bona fide students.

And, I confirm that the above information is accurate, true and correct.

Signature over printed name

Date

Please return to:

Australian College of Management & Technology

Suite 701 Level 7 541 Kent Street
Sydney NSW 2000 Australia.

Ph: +61 2 9267 3438 Fax: +61 2 3267 3868

Email: info@acmt.nsw.edu.au

Website: www.acmt.nsw.edu.au

Application Checklist:

- Completed all sections of Application
- ABN/Business Registration Copy
- Professional/Industry Membership Copy
- Company Profile
- MARA/PIER/OMARA etc.