



Education Agent Application Form

Contact Details:

The Enrolments Registrar
PO Box 16
IPSWICH QLD 4305
Cnr Queen Victoria Pde & Chermside Rd
East Ipswich QLD 4305

Telephone: +61 7 3454 4401
Facsimile: +61 7 3454 4480
Email: registrar@girlsgrammar.com.au
Website: www.girlsgrammar.com.au

If you are a registered agent and wish to apply to become an agent of Ipswich Girls' Grammar School including Ipswich Junior Grammar School, please complete the Education Agent Application Form and return to registrar@girlsgrammar.com.au.

Company Registration Details	
Director's Name:	
Business's Trading Name:	
Business's Legal Entity Name:	
ABN or Company Registration Number:	
Location and contact details:	Address: Phone: () Fax: () Email: Web:
Number of years in operation:	
Number of staff:	
Details of key staff members and/or school consultants:	Name: Position: Email:

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Services provided by the company:	
Details of past and present experience recruiting students:	For Australian or New Zealand schools Number of students _____ For other education sectors Number of students _____
Familiarity with Australian education industry:	Please ✓ or ☒ to confirm your: <input type="checkbox"/> Knowledge of ESOS Act <input type="checkbox"/> Knowledge of National Code <input type="checkbox"/> Completion of the AEI Agent Training Course
Experience in:	Education industry generally Any other major business areas
Details of markets from which you recruit:	Geographical area Characteristics of potential market e.g. preference for boarding

Names of any professional organisations of which the agent is a member:	
Written references, dated and with contact details from two sources:	<p>An Australian or New Zealand school</p> <p>Contact Person: _____</p> <p>Email: _____ and/or Phone contact: _____</p> <p>A referee of the agent's choice</p> <p>Contact Person: _____</p> <p>Email: _____ and/or Phone contact: _____</p>
Details of Sub-Contractor 1, covered by this agreement: OR Details of your Branch offices covered by this agreement:	<p>Agency Name: Address:</p> <p>Phone: Fax: Web: Contact Person: Contact's email:</p>
Details of Sub-Contractor 2, covered by this agreement : OR Details of your Branch offices covered by this agreement:	<p>Agency Name: Address:</p> <p>Phone: Fax: Web: Contact Person: Contact's email:</p>

Completed by: _____

Position in Company: _____

Signature: _____

Date: _____/_____/_____