

RTO: 45205, CRICOS XXXX

EDUCATION AGENT APPLICATION FORM

(DOMESTIC STUDENTS)

Before applying to become an Education Agent for State Institute of Training (SIT), you should access the information on:

- Standards for RTO's 2015
- SIT website <u>www.sit.vic.edu.au</u>

| COMPANY DETAILS | | | | | | |
|---|--|--|--|--|--|--|
| COMPANY NAME | | | | | | |
| ABN | | | | | | |
| CONTACT PERSON | | | | | | |
| POSITION | | | | | | |
| CONTACT PHONE | | | | | | |
| EMAIL | | | | | | |
| WEBSITE | | | | | | |
| ADDRESS | | | | | | |
| | BUSINESS BACKGROUND | | | | | |
| How long has your business been operating as an Education Marketing Agency? | | | | | | |
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| List the number of students recruited for study in the last year | | | | | | |
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| List of other instituti | ons you are currently representing in Australia. | | | | | |
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| List the courses you | promote enrol students into: | | | | | |
| Last the courses you promote child students into | | | | | | |
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| How do you propose to promote SIT? ② Brochures | | | | | | |
|---|----------------|--|--|--|--|--|
| 2 Internet | | | | | | |
| 2 Student Seminars | | | | | | |
| ② Exhibitions | | | | | | |
| ② Agent Website | | | | | | |
| ② Other (please specify): | | | | | | |
| | | | | | | |
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| From which geographical area will your potential market come? Please describe any strengths | | | | | | |
| you have in these regions to justify your choice? | | | | | | |
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| Please use the space provided below to include any other information you cor | sider to be of | | | | | |
| importance to this application. | | | | | | |
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| Are you prepared to comply with all requirements of SIT about advertising, | ☐ Yes ☐ No | | | | | |
| course material, application procedures and providing information to | 0010 | | | | | |
| students? | | | | | | |
| Are you prepared to only use material supplied by SIT to describe its courses? | ☐ Yes ☐ No | | | | | |



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|--|----------------|------------|-------------|------------|--------------|-------------|--|--|
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| REFEREES | | | | | | | | |
| Please list names and contact details of 2 referees from Australian Education Sector | | | | | | | | |
| Referee 1 Name | | | | | | | | |
| Organisation | | | | | | | | |
| Phone | | | | | | | | |
| Email | | | | | | | | |
| | L | | | | | | | |
| Referee 2 Name | | | | | | | | |
| Organisation | | | | | | | | |
| Phone | | | | | | | | |
| Email | | | | | | | | |
| | | DECLAF | RATION | | | | | |
| knowledge. I further deprotection and the requirement of the protection and the requirement of the protection and the requirement of the protection of the p | irement to com | ply with S | tandards fo | or RTOs 20 | 015 as a thi | rd party | | |
| SIGNATURE | | | | | | | | |
| DATE | | | | | | | | |
| The completed form alor marketing@sit.vic.edu.au | • | d documei | nts must bo | e forward | led to: | | | |
| FOR SIT OFFICE USE ON | LY | | | | | | | |
| Date Form Received: | | | | | | | | |
| Supporting Documents Received | | ☐ Yes | □ No | | | | | |
| Received by: | | | | | Date: | | | |