

# PCBT Agent Application Form

Anyone interested in promoting PCBT courses to international and local students must be a registered education agent of PCBT. To become a Perth College of Business and Technology agent, please submit this application with your documents to [marketing@pcbt.wa.edu.au](mailto:marketing@pcbt.wa.edu.au). All personal information collected, used or disclosed by PCBT is confidential and is protected by the Privacy Act 1988, the Information Privacy Act (Vic) and other relevant legislation. Information about Agents or students may be made available to Commonwealth and State agencies if requested by law. Perth College of Business and Technology reserves the right not to proceed with providing an Education Agent Agreement for reasons it may see fit to apply.

## Section 1 – Company / Business Details & Background

|   |  |                                |  |
|---|--|--------------------------------|--|
| <b>Agent Trading name</b>                 |  | <b>Agent Legal Name</b>        |  |
| <b>Agent Legal Name</b>                   |  | <b>Business Establish Year</b> |  |
| <b>Business Registration Number</b>       |  |                                |  |
| <b>Country of Registration</b>            |  |                                |  |
| <b>Number of Staff Working in Company</b> |  | <b>Phone Number</b>            |  |
| <b>Email address</b>                      |  |                                |  |
| <b>Address</b>                            |  |                                |  |

## Your Business Activity

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

## (B.) Name of Director /CEO/ Sole Proprietor

|   |  |                      |  |
|---|--|----------------------|--|
| <b>Title</b>  |  | <b>Gender</b>        |  |
| <b>First Name</b>   |  | <b>Last Name</b>     |  |
| <b>Date of Birth</b>                                      |  |                      |  |
| <b>Country of Birth</b>                                   |  | <b>Mobile Number</b> |  |
| <b>Email address</b>                                      |  |                      |  |
| <b>Director/CEO/Sole-Proprietor Highest Qualification</b> |  |                      |  |

- Is Director also a Registered Member of Australian Migration Agents Authority (MARA)? Yes/ No

- If Yes, MARA Number: .....
- If not, does your company/Business engage a service of a MARA member? If Yes, please provide details of the main registered agent (MARA Member)

.....

*You do not have to engage a MARA member to your business if you are Not advising your clients on their Australian visas or you are not operating in Australia. <https://www.mara.gov.au/using-an-agent/using-a-registered-migration-agent/>*

|                      |  |
|----------------------|--|
| <b>MARA Number</b>   |  |
| <b>Email Address</b> |  |
| <b>Mobile Number</b> |  |

### (C) Headquarter Office/Business

|                     |  |                      |  |
|---------------------|--|----------------------|--|
| <b>Address</b>      |  |                      |  |
| <b>City</b>         |  | <b>Postal Code</b>   |  |
| <b>State/Region</b> |  | <b>Country</b>       |  |
| <b>Phone Number</b> |  | <b>Email Address</b> |  |

### (D) Branch Office 1

|                      |  |                    |  |
|----------------------|--|--------------------|--|
| <b>Address</b>       |  |                    |  |
| <b>City</b>          |  | <b>Postal Code</b> |  |
| <b>State/ Region</b> |  | <b>Country</b>     |  |

#### Principal Staff Information

|                              |  |                      |  |
|------------------------------|--|----------------------|--|
| <b>First Name</b>            |  | <b>Last Name</b>     |  |
| <b>Highest Qualification</b> |  | <b>Position</b>      |  |
| <b>Phone Number</b>          |  | <b>Email Address</b> |  |

### (E) Branch Office 2

|                      |  |                    |  |
|----------------------|--|--------------------|--|
| <b>Address</b>       |  |                    |  |
| <b>City</b>          |  | <b>Postal Code</b> |  |
| <b>State/ Region</b> |  | <b>Country</b>     |  |

#### Principal Staff information

|                              |  |                      |  |
|------------------------------|--|----------------------|--|
| <b>First Name</b>            |  | <b>Last Name</b>     |  |
| <b>Highest Qualification</b> |  | <b>Position</b>      |  |
| <b>Phone Number</b>          |  | <b>Email Address</b> |  |

### (F) Branch Office 3

|                     |  |                    |  |
|---------------------|--|--------------------|--|
| <b>Address</b>      |  |                    |  |
| <b>City</b>         |  | <b>Postal Code</b> |  |
| <b>State/Region</b> |  | <b>Country</b>     |  |

#### Principal Staff Information

|                              |  |                  |  |
|------------------------------|--|------------------|--|
| <b>First Name</b>            |  | <b>Last Name</b> |  |
| <b>Highest Qualification</b> |  | <b>Position</b>  |  |

|                     |  |                      |  |
|---------------------|--|----------------------|--|
| <b>Phone Number</b> |  | <b>Email Address</b> |  |
|---------------------|--|----------------------|--|

**(G) Agency Performance and experience**

- How many Australian Educational institutions are you currently representing?

  

- Please list the total number of students referred to Australian Education Institutions in the last two (2) years.

  

- Total number of students referred to Australian ELICOS Courses in the last two (2) years.

  

- Total number of students referred to Australian Vocational Courses in the last two (2) years.

  

- Total number of students referred to Australian Undergraduate Courses in the last two (2) years.

  

- Total number of students referred to Australian Postgraduate Courses in the last two (2) years.

  

- Please outline the support services you can offer students. (Please provide extra details on a separate sheet if required).

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**(H) Compliance Requirements**

1. Have you or any of your staff completed the Education Agents Training Course (EATC) available on: [www.pieronline.org](http://www.pieronline.org)?  
Yes / No
2. Do you have the knowledge and a good understanding of the requirements of the ESOS Act and National Code? Yes / No
3. Do you regularly monitor the Australian Department of Home Affairs (DHA) website (<https://www.homeaffairs.gov.au/>) and the Department of Education and Training Website (<https://education.gov.au/>)?  
Yes / No
4. Do you understand and advise students coming to Australia on a student visa have a primary purpose of Studying and must study full time?  
Yes / No
5. Are you willing to comply with the requirements of the College regarding advertising, course materials and application procedures, and provide accurate information to students?  
Yes / No
6. Are you prepared to use materials by the College to promote its courses?  
Yes / No
7. Character check: Has the registered owner or staff of the company even been convicted of a criminal offence?  
Yes / No
8. Character check: Has the company or registered owner ever been declared bankrupt?  
Yes / No

**(I) Potential Market & Services**

**Which are your target markets? Please describe any strength you have in these markets. (Please provide extra details on a separate sheet if required).**

*Example:*

- Target Country and Nationality 1: Onshore Australia, Chinese nationals
- Target Country and Nationality 2: Onshore Australia, Italian nationals
- Target Country and Nationality 3: UAE, Indian, Filipino, UAE nationals

|   |  |
|---|--|
| <b>Target Country and Nationality 1</b> |  |
| <b>Target Country and</b>               |  |

|  |  |                      |  |
|--|--|----------------------|--|
| <b>Nationality 2</b>   |  |                      |  |
| <b>Target Country and Nationality 3</b>  |  |                      |  |
| <b>Target Country and Nationality 4</b>  |  |                      |  |
| <b>Target Country and Nationality 5</b>  |  |                      |  |
| <b>What do you believe is the most effective marketing strategy to use in your area, region or market? (Please provide extra details on a separate sheet if required)</b>  |  |                      |  |
|  |  |                      |  |
| <b>(J) Reference Check</b>   |  |                      |  |
| <b>Australian Education Institution Name ( 1):</b>   |  |                      |  |
| <b>Main Contact Person</b>   |  | <b>Position</b>      |  |
| <b>Phone Number</b>  |  | <b>Email address</b> |  |
| <b>Australian Education Institution Name ( 2 ):</b>  |  |                      |  |
| <b>Main Contact Person</b>   |  | <b>Position</b>      |  |
| <b>Phone Number</b>  |  | <b>Email address</b> |  |
| <b>(K) Declaration</b>   |  |                      |  |
| <input type="radio"/> <b>I declare that I have read and understood ESOS Act 2000 – Obligations of Agents and that the answers and details Provided in this application is true and accurate to the best of my knowledge and I authorise PCBT to approach referees.</b> |  |                      |  |
| <input type="radio"/> <b>Please email this form along with your documents as necessary to Ryan Rahimi at <a href="mailto:marketing@pcbt.wa.edu.au">marketing@pcbt.wa.edu.au</a></b>  |  |                      |  |
| <b>Full Name of person submitting this agent application form:</b>   |  |                      |  |