

Please complete this form to apply to become an authorized agent for Greenhill Education Group Australia Pty Ltd trading as Royal Greenhill Institute of Technology (RGIT) Australia for the purpose of recruiting students to study at theinstitute.

Your Agency Details			
What is type of business is your agency?			
O a sole proprietor	Name of proprietor:		
or 🔘 a partnership	Name of partners:		
or O an incorporated company ▶	Registered company name:		
	Trading name (if applicable):		
	Number of directors:		
	Name of directors:		
	Place of registration:		
	Date of registration:	Expiry date:	
	Australian Business Number (ABN): (or equivalent registration number)		
	MARA no.:	QEAC no.:	
Your Correspondence Detail	S		
Street address:		Country:	
Postal address:		Country:	
Telephone:		Fax:	
Email:			
Website:			
Your Main Contact Details			
Name of Chief Executive Officer/ Dire	ctor: Mr. Mrs.	Miss Ms. Dr	
Given names:	Surno	ame:	
Name of your main contact officer:	☐ Mr.☐ Mrs.☐	Miss Ms.Dr	
Given names:	Surno	ame:	
Direct telephone:	Mob	ile:	
Fax:	Emai	il:	

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Your Business Profile			
How many offices / representative offices do you have & where are they located?			
Are you a member of any agent assoc	ciation or professional industry body?	☐ Y€	es 🔲 No
Name of the industry body (e.g. Educat	ion Agent Association)	Years of membership	
Which courses are your clients most in	terested in? (Please tick relevant boxe	s)	
General English [University Foundation	Undergrac	
Academic English [Vocational Education	Postgradu	ate
Other:			
Which Australian education institutions	do you currently represent?		
Name of Institution	How many years have you represented this Institution?		Total number of students recruited to this Institution?
Which education institutions do you re	present for countries other than Austral	ia?	
Name of Institution	How many years have you represent Institution?	ed this	Total number of students recruited to this Institution?

Responsibility: International Sales and Marketing Manager

Greenhill Education Group Pty Ltd t/a RGIT Australia.
National Provider No.: 22088 ABN: 68 127 999 160 CRICOS Code: 03002G

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If appointed as an Agent for RGIT Australia, how many students will you aim to recruit in the first year?			
State briefly how you plan to recruit students to the courses offered by RGIT Australia?			
Do you charge (or intend to charge) students / applicants any for processing their application?	ee or commission for		
How many years experience you have in Australian education S	Sector?		
Are you member of PIER? (Please send me the certificate copy)			
Are you member of AAERI (India) or ECAN (Nepal)? (Please send me the certificate copy)			
A comprehensive marketing plan including strategies to be employed to ensure students recruited by the agent are genuine and meet entry and financial requirements			
Your References			
Please provide the name of three referees who may be contacted referee must be from an Australian education institute.	ed if your company is selected. At least one		
Referee1			
Name:			
Company:	Position:		
Address:			
Phone:			
Email:			
Referee 2			
Name:			
Company:	Position:		
Address:			
Phone:			
Email:			

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Referee 3					
Name:					
Company:	Company: Position:				
Address:					
Phone:					
Email:					
Declaration by the Agent					
I confirm that the information provided also authorize Greenhill Education Groupproval of my application is condition Education Group Australia Pty Ltd in actincluding standardsfor NVR.	up Australia Pty Ltc nal on my compar	to approach i ny signing an A	my referees gent Agree	. I acknowledge that ement with Greenhill	
Authorized Signature:			Date:	Date:	
Name of the Officer:			Position:		
Application Checklist		Return o	complete	ed application to:	
☐ Application form completed and signed ☐ Evidence of business registration attached ☐ Completed and signed Agent Agreement attached		Email: marketing@rait.edu.au Fax: +61 3 8639 9000 Post: GPO Box 5466, Melbourne VIC 3000, AUSTRALIA			
Office use only:					
•	A ganay ganaraya	nd. \square Var \square N	Jo	Date	
Referees checked by:	Agency approved: Yes No		Date:		
Approved by:	Agreement signed: Yes No		Agent Code:		
Comments:					

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