



Agent Application Form

Agent Business Name	
ABN No. if available	
MARA Code (if applicable)	
Head office contact details	
Contact Name	
Position	
Email:	
Phone	
Fax:	
Address	
Details of any branch office (if applicable)	
About You	
Years in education consultation	
Number of Students enrolled in Australia last year and this year until now:	
Primary Business	
Details of services provided to students	
Members of associations	

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Document Name	Agent Application Form	Issued:	March 2026	Ver 2
Authorised by CEO	CRICOS# 03499K	RTO # 40953	Review:	24 months
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Have you previously worked in conjunction with another education agent?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
List the countries that you represent			
Referees			
List two referees from Educational Institutes that your Agency represents. One referee must be from an Educational Institute in Australia			
Referee 1			
Contact Name		Position	
Organisation		Phone	
email		Fax	
Address			
Referee 2			
Contact Name		Position	
Organisation		Phone	
email		Fax	
Address			

DECLARATION: I/We am interested in representing Training Australia First as an education agent and I/We agree to do so in an honest and professional manner. I/We acknowledge that Training Australia First does not pay commission for onshore transfer students as defined under the National Code and agree not to encourage unnecessary onshore transfers for financial benefit.

Signature: _____ Date: _____

Please forward this form and send it to:
manish@taf.edu.au

or post it to

1836 Sydney Rd Campbellfield Vic 3061

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