ACTB.
Australian College of Technology & Business P/L

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100 Brunswick Street, Fortitude Valley, Brisbane, Queensland, Australia

AGENT REFERENCE CHECK

(This form should be completed by an educational institution that uses the agent's services)

Name of Education Agency: _____

Educational Institution Name:			
Referee's Name:			
Phone:		Fax:	
Email:			

1. Is the Agent registered with your institution? Yes ☐ No ☐

2. How long has your institution been dealing with this agent? _____

3. Has the agent recruited any SVP students for you? Yes ☐ No ☐

4. How do you find the quality of applications being submitted by this agent?

Excellent	☐	Very Good	☐	Good	☐	Fair	☐	Poor	☐

4. Please rate the Agent in respect to payment and administration requirements.

Excellent	☐	Very Good	☐	Good	☐	Fair	☐	Poor	☐

5. Approximately how many students are referred by this agent to your institution annually? _____

6, Generally speaking, how is the attendance record of students referred by this agent?

Excellent	☐	Very Good	☐	Good	☐	Fair	☐	Poor	☐

7. How cooperative/supportive is this agent with post enrolment issues/problems their students may have?

Excellent	☐	Very Good	☐	Good	☐	Fair	☐	Poor	☐

8. Would you recommend this Agent? Yes ☐ No ☐

9. Any additional comments:

_____

_____

_____

_____

I declare that all of the information given is correct.

Signed: _____ Date: _____

Thank you for your assistance!
Please email the completed form to applynow@actb.com.au