

Education Agent Application Form

About This Form

Thank you for your interest in becoming an education agent with Australian National Institute of Management. Once we receive your application, we will acknowledge we have received your application within 3 working days of receipt. If you require any assistance in completing this form, please contact us by phone or email. Please ensure you include the details of two referees who can support your application.

Once we have assessed your application (within 10 working days of receipt), we will be in touch with you in writing regarding the outcome of the application. If the application is approved, we will send you an agreement in writing for signing and you will need to participate in an induction with us thereafter.

You can send this form back to us by post or email.	
Company Details	
Company's Legal Name:	
Company's Trading Name:	
ACN/ABN (For Australian Companies):	
Address:	
Phone Number:	
Email Address:	
Company's Overview:	OIKALIAN NATIONAL——
Company's Experience in the industry:	
Benefits to ANIM:	



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STITUTE OF MANAGEMENT Referee Details		
	Referee 1	
Company Name:		
Contact Person Name:		
Position:		
Phone Number:		
Email Address:		
Referee 2		
Company Name:		
Contact Person Name:		
Position:		
Phone Number:		
Email Address:		
Privacy Notice Australian National Institute of Management is required to collect education agents' personal information. This may be shared with the Australian Government as required for the purposes of: 1. Promoting compliance with the National Code 2. Assisting with the regulation of Agent Agent Declaration		
I declare that the information provided	l is true and correct. osure of my personal information as per the Privacy Notice.	
Name of education agent representative:	'UTE OF MANAGEMENT	
Representative's position:		
Signature:		
Date:	D D M M Y Y Y Y	