## STUDENT REPRESENTATIVE INFORMATION FORM



E: info@berkeley.edu.au

## WORK WITH US

## SELLECT COLLEGES

Please complete this form and return it to us with the supporting documents. E.g. Company registration certificates, company profile (if applicable) & etc.

Please note the agreement may take up to 2 weeks from the submission of this form.

 BERKELEY
 Berkeley Business Institute

 ABN 82 159 598 197 | CRICOS CODE 03395G | RTO 40697

 York
 York Business Institute

 York Business Institute
 E: info@york.edu.au

 York English College
 ABN 50 606 511 353 I CRICOS CODE 03549E I RTO 45033

Company Details					
Company Name		Director(s)			
Australian Business Number(ABN) ( if applicable )		Australian Migrati ( if applicable )	Australian Migration Agency Number ( if applicable )		
Address		Suburb	State	Post Code	
Phone	Mobile		Fax		
Email		Website			

## **Company Status & Background**

How long has your business been operating?

List institutions you	are currently represe	enting in Australia	1:				
1.							
2.							
3.							
How do you promote	international educati	on and how will yo	ou promote our college	?			
Onsho	re	Offshore	Others				
The countries/region	ns covered by your c	company					
China	Thailand	Korea	Europe	South America	Othe	ers	
What is the projecte	d number of student	s you plan to send	d in the next six month	ns?			
Please list the most	popular courses you	ı promote now:					
Please list two refer	als.						
1. Name:				2.	Name:		
Institution: Email:					Institution: _ Email: _		
Signature of					Name	of Director(s)	
Director(s)					Date		(DD/MM/YYYY)
000	0.1						
Offical Use	e Unly						
Received by						Date	 (DD/MM/YYYY)
Agreement Pre	epared by					Date	 (DD/MM/YYYY)
Entered in syst	em					Date	 (DD/MM/YYYY)