

Trinity College Dublin Coláiste na Tríonóide, Baile Átha Cliath

The University of Dublin

Education agent application form

Please accurately complete all sections of this application form to avoid delay in your application to become an education agent for Trinity College Dublin, the University of Dublin.

Section one: Organisational information

1.1 Name of your organisation	
1.2 Registered company name	
1.3 Trading name	
1.4 Name of owner of the company	
1.5 Name of Chief Executive	
1.6 Name of contact person	
1.7 Head office address	
1.8 Telephone number	
1.9 Fax number	
1.10 Email address	
1.11 Website	

Section two: Organisation practices

2.1 Are you accredited to act as an education agent in your country? Yes

No

If you have answered yes to the above question, please provide details below

2.2 In which year did your company first start operations as an education agent?
2.3 Is your company involved in any additional activities? Yes No
If you have answered yes to the above question please elaborate below
2.4 How many of your staff are engaged in full time education consulting?
2.5 Do any of your members of staff hold country specific training certifications? Yes No
If you have answered yes to the questions above please provide details below
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2.6 At which education level do you currently recruit students? Please indicate below

High School	Undergraduate	Post Graduate Degree	English language	
Foundation				

2.7 Please list location of student counselling and recruitment branches below:

Branch name	Location	Contact person

2.8 Do you employ other companies to recruit students on your behalf? Y	ſes
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No

If you have answered yes to the above question, please complete the table below

Company name	Location	Contact person

Section 3: Student recruitment practices

3.1 Do your students pay your organisation a fee for your services?	Yes		No	
If you have answered yes to the above question please provide specify the amo	unt and c	urrency		
3.2 Does your organisation hold promotional events?	Yes		No	

If you have answered yes to the above question, please elaborate below

Location of event	Event date	Name of institutions who attended

3.3 Please provide details of two recent educational promotional events that your organisation has taken part in (include event name, venue and date of event)

Event 1	Event 2

3.4 Please detail the channels of student recruitment that your organisation utilises?

Channel one	Channel two	Channel three	Chanel four

3.5 Do you have any links with high schools or institutions in your region?

If you have answered yes to the question above, please detail information on your links below

Section 4: Organisation partnerships

4.1 How many students does your company enrol in educational institutions each year?

4.2 Do you currently recruit students to study in Ireland? Yes

If you have answered yes to the question above, please detail information on the institutions that you currently work with

No

Name of institution	Duration of relationship

4.3 How many students did your organisation send to Ireland & UK last year?

4.4 Please detail any prestigious universities that you currently work with from around the world

Name of institution	Duration of relationship

4.5 Please indicate below the countries you wish to recruit from to study at Trinity College Dublin.

1.	2.
3.	4.
5.	6.

Section 5: References

5.1 Please provide details of three referees from high-ranking Universities that you currently represent:

Reference one

University	
Contact Name	
Address	
Telephone	
Email	

Reference two

University	
Contact Name	
Address	
Telephone	
Email	

Reference three

University	
Contact Name	
Address	
Telephone	
Email	

Section 6: Declaration

Please read the declaration below:

I confirm that I have all the necessary registrations, accreditations and permissions to act as an education agent in the countries which I have nominated, and understand that I must notify Trinity College Dublin, the University of Dublin of any changes that may occur in the registration status of my agency. I undertake that the information provided in this application is a true and accurate record as to the operation of the educational agency I represent.

Name:	
Position:	

For Office use only:

Received by	
Date	
Territory	
Term	
Level	