

Agent Application Form

Part A: Company Profile	
Type of Business	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Private Limited <input type="checkbox"/> Public Listed <input type="checkbox"/> Others (Please Specify): _____
Please provide a copy of your business registration.	
Name of Company	
Address	
Telephone (Country & Area Code)	+
Fax	+
Is your company government/education ministry Accredited?	No / Yes If yes, please provide a copy of the document and/or letter.
Contact Person	
Name of Applicant	Mr./Ms./Mrs./Dr:
Position / Designation	
Telephone / Mobile	+
Email Address	
Alternative Representative	
Telephone / Mobile	+
Email Address	

Part B: Industry Experience and Reputation

<p>Number of years as a recruitment agent / Number of employees.</p>	
<p>Country / Territory that your agency serves.</p>	
<p>Names and contact person of other PEI(s) your agency is representing in Singapore (if applicable):</p>	
<p>How long has your agency been sending students to Singapore?</p>	
<p>Number of students sent to Singapore each year:</p>	
<p>Does your agency charge a service / counselling fee?</p>	<p>Yes / No If Yes, how much? Please also specify the purpose.</p>
<p>What other services do you provide to students? <i>(Please put a tick to the applicable box. You can choose more than one.)</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Assistance in submitting documentation for admission into a course <input type="checkbox"/> Arrangements for English Language Test <input type="checkbox"/> Assistance in arranging a student loan <input type="checkbox"/> Student Counselling <input type="checkbox"/> Offer premise for student counselling and seminar <input type="checkbox"/> Assist students with submitting documentation for student pass application <input type="checkbox"/> Assist students with immigration advice <input type="checkbox"/> Pre-departure briefing <input type="checkbox"/> Other service(s), please specify: _____

Kindly provide photographs (Outdoor and Interior) of your office for, if applicable, for verification.

Part C: Commitment	
How did you learn about SSTC Institute?	<input type="checkbox"/> Internet <input type="checkbox"/> Exhibition <input type="checkbox"/> Friends <input type="checkbox"/> Students <input type="checkbox"/> Others
Why is your agency interested in representing us?	
Proposed numbers of students to send to SSTC Institute:	
What SSTC Institute courses do you intend to market?	
Can you provide a strategic marketing plan for student recruitment?	Yes / No If Yes, kindly attach the copy of the marketing plan.
What kind of support do you expect when you become our official agent?	

Declaration:

I am interested in representing SSTC Institute as an Education Agent and I agree to do so in an honest and professional manner.

Name

Signature

Designation

Date

Company Stamp (if applicable)

For Internal use only:

Submitted by: _____

Date: _____

Approved by: _____

Date: _____

Please email this Application Form back to info@sstc.edu.sg or to the Territory Managers for a formal evaluation and approval. Thank you.