

AGENT FORM 2023



AGENCY INFORMATION

Agency Name: _____

Contact Name: _____

Position: _____ Email: _____

Address: _____

City: _____ State/Province: _____

Country: _____ Postal Code: _____

Tel Number: _____ Website: _____

How many years have you been established? _____

Are you recognized by any accreditation agencies in your country? _____ YES _____ NO

If yes, which? _____

How many students did you send to language schools last year? _____

How many students do you project to send to language schools this year? _____

How did you hear about us? _____

REFERENCES

Our accreditation requires for us to seek third party information about your agency. As such, you are required to provide two (2) references from schools that you are currently working with. Please make sure to include the name of the school, name of the person we should contact, their email address and their telephone number.

SCHOOL	CONTACT	EMAIL
_____	_____	_____
_____	_____	_____

SIGNATURE OF AUTHORIZED OFFICER

Name: _____ Position: _____

Signature: _____ Date: _____ / _____ / _____
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