

INTERNATIONAL STUDENT RECRUITMENT AGENT APPLICATION FORM



This application form should be used in conjunction with the New Zealand Ministry of Education Code of Practice for the Pastoral Care Code of International Students code of practice 2016.

www.education.govt.nz/ministry-of-education/legislation/regulations-to-support-international-students

Please complete this application form in full and return to the following address:

Director of Marketing
IPU New Zealand
Private Bag 11021
Palmerston North 4410
New Zealand

Or email to: info@ipu.ac.nz

1. YOUR COMPANY DETAILS

NAME OF COMPANY

REGISTERED COMPANY NAME

REGISTRATION NUMBER Please provide a translated and certified copy

NAME OF OWNER OF COMPANY

NAME OF CHIEF EXECUTIVE OFFICER

NAME OF CONTACT PERSON

STREET ADDRESS OF HEAD OFFICE

Postcode

POSTAL ADDRESS OF HEAD OFFICE

Postcode

TELEPHONE

FAX

EMAIL

WEBSITE

2. BUSINESS BACKGROUND

What is the primary purpose of your company? (eg. Recruitment, travel, education)

Please list the location(s) of Student Counselling and Recruitment branch(es) of you company:

How many staff members are working in these Student Counselling and Recruitment branch(es)?

Please list any subsidiaries and/or associated companies:

Do you employ other companies to recruit students on your behalf?

Yes No

If yes, please specify

Please list the details of these companies:

3. INTERNATIONAL STUDENT RECRUITMENT EXPERIENCE

How long has your business been in operation as an education recruitment agent?

Do you, or your company, conduct business activities other than student recruitment?

Yes No

If yes, please specify

For which countries do you currently recruit the most countries? (Please include the length of time you have been recruiting for these countries)

How many students did you send to New Zealand last year?

Please give details of two recent education promotions you have participated in:

Event _____
Venue _____
Date _____

Event _____
Venue _____
Date _____

4. SERVICES PROVIDED BY YOUR ORGANISATION

Do students pay your organisation a fee for your services?

Yes No

If yes, how much is this fee? (Please specify currency and amount)

Please check the services you provide to students: (Please add additional costs where cost)

How many students did you send to New Zealand last year?

Educational Counselling _____
 Application Procession _____
 Visa Applications _____
 Study Loan Assistance _____
 English Language Courses _____
 Immigration Advice _____
 Accommodation Assistance _____
 Interview Preparation _____
 Travel Arrangements _____

Other _____

Student entering New Zealand must comply with immigration requirements. What process do you have in place to assist students with travel, immigration and other documentations?

Please list details of the services you provide institutions. Please include any services provided by other offices of your organisation.

5. EXPERIENCE OF NEW ZEALAND EDUCATION

Has any member of your staff studied in New Zealand?

Yes No

If yes, please list the institution(s) and details of study:

6. KNOWLEDGE OF NEW ZEALAND

What personal or professional links do you already have with New Zealand?

Do you visit New Zealand in the course of your business?

Yes No

If yes, which part(s) of New Zealand do you visit and how frequently?

What is your student visa approval percentage rate in New Zealand for the last six months?

Please list any other New Zealand or Australian institutions you currently represent: (Please include details regarding the length of the relationship)

7. BUSINESS CREDENTIALS

Please provide details of three referees. Please provide two New Zealand institutions whom we may contact. If you are unable to provide New Zealand referees, please provide an English speaking contact from non-New Zealand institutions. These referees will need to be from institutions you are currently working with.

Name of Referee	_____
Name of Organisation	_____
Address:	_____
Telephone	_____
Fax	_____
Email	_____
Name of Referee	_____
Name of Organisation	_____
Address:	_____
Telephone	_____
Fax	_____
Email	_____

Name of Referee _____
Name of Organisation _____
Address: _____
Telephone _____
Fax _____
Email _____

8. DECLARATION

Company Name

On behalf of _____, I confirm that we are interested in being considered as an International Student Recruitment Agent for IPU New Zealand

I authorise IPU New Zealand to carry out necessary checks to verify the details I have supplied above and to carry out such credit checks necessary to assure IPU New Zealand as to the financial standing of my organisation/company.

Initial _____

I confirm that I have read, understand and will comply with the conditions outlined in the New Zealand Ministry of Education Code of Practice Care of International Students code of practice 2016.

Initial _____

I confirm that I have never been involved in the forgery of documents.

Initial _____

I grant IPU New Zealand the right to seek the disclosure of The Company performance data from Immigration New Zealand. This data may be based on total student visa applications regarding global performance or any market and date range. The data may also include the relevant reasons for decline during the visa application process and any instances of fraud or misrepresentation regarding any applicants represented by The Company.

Name _____

Position in Company _____

Signature _____

Date _____

Please enclose your business card, samples of your publicity material and any other information you consider relevant to support your application to become an International Student Recruitment Agent for IPU New Zealand.