



Christchurch Girls' High School | Te Kura o Hine Waiora

AGENCY APPLICATION FORM

Agent Details	
Agency Name:	
Street Address:	
Postal Address: (If different)	
Website:	
Social Media Links:	
Which countries do you recruit students from?	
Which countries do you send students to?	
How many secondary age school students do you send to New Zealand each year?	
How many years has the agency been operating?	
How many offices do you have?	
Where are your offices located?	
Have any of your staff members visited Christchurch before?	
Please list any of your staff who have completed the Education New Zealand education agent online training:	
	Date Completed:
	Date Completed:
	Date Completed:
	Date Completed:

Main Contact Details:	
1. Name:	Email:
Mobile Phone:	Position/Responsibilities:
Additional Agents Contact Details:	
2. Name:	Email:
Mobile Phone:	Position/Responsibilities:
3. Name:	Email:
Mobile Phone:	Position/Responsibilities:
References	
<i>Please provide the name and contact details for two referees. If your organisation is currently providing students to New Zealand schools, these schools must be listed as your referees. For other referees, those resident in New Zealand are preferred.</i>	
Referee 1:	
Contact Person:	Email:
Referee 2:	
Contact Person:	Email:
Declaration	
<i>I/We declare that the information provided in this application form is true and correct. I/We agree that information provided in this form and information collected from the referees nominated in this form may be shared for the purposes of conducting appropriate due diligence on the agency as required by the Education (Pastoral Care of International Students) Code of Practice 2016.</i>	
Name:	Position:
Signature:	Date: