

Agent Application Form

If you would like to become an agent for Rangitoto College, please complete this form and email it to kieran@rangitoto.co.nz to give us a better understanding of your organisation.

Agency Name _____

Street Address _____

Postal Address (if different) _____

Website _____

Social Media _____

Office Phone Number () () _____
(Country Code) (City)

Emergency Contact Number: () _____

NZ GST Number (NZ based agents only) _____

Which countries do you send students from? _____

How many students do you send abroad each year in total? _____ To NZ? _____

How many high school students do you send abroad each year? _____ To NZ? _____

How many years has the agency been operating? _____

How many offices do you have? _____ Where? _____

Have any of your staff members visited NZ before? _____

CONTACT PEOPLE

Name of main contact person (Mr / Mrs / Ms) First name: _____ Family Name: _____

Email address _____ Position in agency _____

Mobile number: () _____

Extra contacts for high school:

Name	Position / Responsibilities	Email Address

REFERENCES (preferably another NZ secondary schools)

Education Provider _____

Contact person: _____ Email _____

Education Provider _____

Contact person: _____ Email _____