

# Education Agent Reference Check Form

<b>Education Agent Name:</b>			
<b>Referee's Institution:</b>			
<b>Name:</b>		<b>Title:</b>	
<b>Phone:</b>		<b>Email:</b>	

Please give a brief summary of your business dealings with this Education agent

How long has this education agent worked with institution?	
How do you rate the education agent's level of understanding of the Standards for RTOs 2025, ESOS Act, NCP 2018 and Australian visa regulations etc.?	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Below Average <input type="checkbox"/> Additional Comments:
Have you found the education agent to be reliable and ethical?	<input type="checkbox"/> Yes <input type="checkbox"/> No  <input type="checkbox"/> Additional Comments:
What is the quality of the education agent's paperwork and necessary documents?	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Below Average <input type="checkbox"/> Additional Comments:
What has been the general quality of the applicants from this education agent?	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Below Average <input type="checkbox"/> Additional Comments:

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What is the education agent’s application to enrolment conversion rate for your institution?

- Excellent
- Very Good
- Good
- Below Average
- Additional Comments:

How many students have enrolled through this education agent in the past 12 months?

Would you recommend this education agent?

Yes  No

Other comments/relevant information:

*We appreciate you taking the time to complete this form. Please return it via email to:*

**PAX Institute of Education Pty Ltd**  
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*For office use only:*

Approved:  Yes     No

Staff Member: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_