



CHANGE OF EDUCATION AGENT FORM

This form is to be completed by students to update the details of the new Education Agent he/she is nominating. Please ensure all sections are completed and submit to Student Services within 7 days of the change.

Section 1 - Student Details

Full Name:

Student ID:

Date of Birth:

Course Name:

Intake Date:

Email Address:

Phone Number:

Section 2- Current Education Agent Details (Before Change)

Current Agent Name:

Agency Name

Agency Phone Number:

Agency Email Address:

Section 3 - New Education Agent Details

Effective From Date:

New Agent Name:

Agency Name:

New Agency Address:

Street Number: _____

Street Name: _____

Suburb: _____

Post Code: _____ State: _____

Agent Phone Number:

Agent Email:

Section 4 - Reason For Change

Please explain the reason for changing your education agent:

Section 5 - Student Declaration

I declare that:

☐ I confirm that I am voluntarily requesting to change my education agent.

☐ I understand that the provider may contact both the current and new agent regarding this request.





☐ I understand that any commission arrangements are between the provider and agent and do not affect my enrolment status.

☐ I confirm that all information provided is true and correct.

Student Signature:

Date:

Section 6: Office Use Only

Request Received by:

Date Request Received:

**Confirmation call made with
new Education Agent**

☐ No

☐ Yes

Date:

Processed by:

Position:

Staff Signature:

SMS Updated

☐ No

☐ Yes

Updated By:

Date:

PRISMS Updated

☐ Yes

☐ No

Updated By:

Date:

Notes:

