

## CHANGE OF AGENT REQUEST FORM



Jasmine Education Group Pty Ltd t/a Queen Anne English College - Queen Anne Business College

ABN: 551320089025 | National Provider Code: 40458 | CRICOS Provider Code: 03240D

Bankstown Campus: Level 1, 49 Raymond Street, Bankstown NSW 2200 | Sydney City Campus: Level 4,225 Clarence Street, Sydney, NSW 2000 Phone: (02) 97074840| Email: admin@qaec.nsw.edu.au | Website: www.qaec.nsw.edu.au

1. Student Details							
Full name :	ID:						
Course :	Start : End :						
Phone:	E-mail:						
Address:							
Suburb:	State : Post Code:						
Please update i	my contact as above: Yes No 🗆						
2. Current Ag	ent Details						
Agent Name :							
3. Nominated Agent Details							
Agent Name :							
4. Reason for the change							
If this request is successful I request that the above Nominated Agent act for and on my behalf in relation to my application to study at the Queen Anne English College – Queen Anne Business College.  I give my consent to the Queen Anne English College – Queen Anne Business College to disclose my personal information to the above nominated Agent for the purposes of my application and otherwise in accordance with the Queen Anne English College – Queen Anne Business College's privacy Policy.							
Student signature :	Date:						

## Please Note:

• All requests will take approximately 7 working days from the day of submission to be processed

Change Of Agent Request Form	Jasmine Education Group	Version 3.3		
Last Updated: 13 October 2020	Next Review Date: 13 October 2022			
Authorised by CEO	Page 1 of 2			



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Office use only									
Task	Staff						Do	ate	
Received by									
RTO Manager Updated									
Request	Α	pproved			Declined				
outcomes	Name			Signature					
Notes/ Reasons									
·									

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