

Change of Agent Request Form

INSTRUCTIONS: Complete and sign this form, and submit it to Student Services with the necessary documents.

NOTE: If your Application to Change of Agent Request is approved, your existing Agent will receive all fees and commissions for all courses for which AITE has issued CoEs. The change will only apply in relation to future Applications and CoEs.

You may submit this Form and your supporting documents to AITE on <address></address>			
Family Name:	Given Name:		
Student No:	Date of Birth:		
Course:			
Present Agent:			
Does your present Agent agree to the Change	of Agent? YES	NO 🗌	
If 'YES', please attach a signed Release Letter f	rom your existing Agent.		
If 'NO', please submit your reasons for wanting best interests. If there is not enough room please			would be in your
Preferred new Agent			
NOTE: If your preferred new Agent is not one will not be approved.	of AITE's list of Authorised Age	nts on the AITE Website,	your Application
Agency Company:			
Agent's name:			
Agent's Phone: Email:			
Attached Documents:			
Release Letter from present Agent:		YES	NO
 Agency Agreement to Represent Forn 	n from preferred new Agent	YES	NO
Signature: DAITE			
On receipt of the completed forms AITE will co your application is approved your agent repres		· · · · · ·	
NOTE: This Application will be considered and processed in	n accordance with AITE'S Education Age	ents Policies and Procedures.	