



# London College of Computing and Management Sciences

## Agents Application Form

### Contact details

Company Name:		Country :	
Contact Name:		Tel:	
Job Title:		Fax:	
Company address:		Email:	
Website (if any):			
Company License/ Registration Number:			
License/ Registration Expiry Date:			

### Please answer the following questions

How many years you have been in this business? (in years)	
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What marketing Strategies do you use to attract students?(send examples)
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TV	<input type="checkbox"/>	Newspaper	<input type="checkbox"/>
Radio	<input type="checkbox"/>	Internet	<input type="checkbox"/>
Pamphlets	<input type="checkbox"/>	Others (Please Specify)	<input type="text"/>

### What Criterias you choose to measure students' ability for the following:

Academic	<input type="text"/>
Financial	<input type="text"/>
English Language	<input type="text"/>

### How many student applications do you forward to institutions and colleges:

Overseas(specify)	<input type="text"/>
UK	<input type="checkbox"/>



**What is the success rate of your applications to enrollment:**

Overseas  %

UK ( Specifically)  %

**What is your overall VISA success rate?**

Overseas  %

UK (Specifically)  %

**How do you keep up to date with current VISA rules and regulations?**

**Do you ask students to provide feedback about institutes / colleges?**

Yes

No

**Do you visit institutes you represent or where you send students?**

Yes

No

If yes How Often

**Do you charge students for your services?**

Yes

No

If yes How Much

**Please provide the list of institutes you represent?**

**How did you hear about LCCMS?**

Internet

Other Agents

Others (specify)



<b>References</b>			
	<b>Institute 1</b>	<b>Institute 2</b>	<b>Institute 3</b>
<b>Name of Institute</b>			
<b>Full Address of the Institute</b>			
<b>Name of Contact person in the Institute</b>			
<b>Tel. No of the institute</b>			
<b>Email Id to contact</b>			
<b>Tenure of you working with the institute</b>			
<b>Rate of applications received to students enrolled in these institute</b>			

**Declaration:**

I declare that the information provided is true and complete to the best of my knowledge.

**Signature:**

**Date:**