Agency Name:

Business License / Registration Number:

Agency Address (head office):

Agency Address (branches):

Phone: Fax:

Email: Website:

Agency Contact Person: Title:

Email: Phone:

Brief agency history (when and where it was founded, how it developed) and what sets you apart from others:

Number of full-time employees: Do you charge students fees for your services?   YES   NO

Please list the services you provide to students:

Top 3 countries your students come from: Top 3 countries your students go to:

1.   1.   Number of students who you sent abroad in the last 12 months:

2.   2.

3.   3.

Number of students who you sent to Canada in the last 12 months: Number of students you estimate to send to Alexander Academy in the next 12 months

Number of students who you sent to Vancouver the last 12 months:

Marketing and Recruitment Activities your agency uses (mark ones that apply):

☐ Education Fairs   ☐ TV or Radio Ads   ☐ Web-Marketing   ☐ Catalogues   ☐ Other (specify):

☐ Print Ads   ☐ Outdoor Ads   ☐ Seminars   ☐ Referrals

Most of your students are interested in the following education programs (mark ones that apply):

ESL Schools   High School   College   Graduate   Other (specify):

Pathway Programs   Vocational   Undergraduate

How did you learn about Alexander Academy?   Referral   Internet   Other:

Please list two references from a high school which you represent (preferably from Canada):

School or district: School or district:

Contact Name: Contact Name:

Email: Email:

Phone number: Phone number:

Signature: Title: Date: