

Agent Profile Form

Name of Business	
Contact Name	
Business Address	
Telephone Number	
Email Address	
Fax	
No. of Branches and the City they are based.	
No. of Years of Establish	
No. of Employees	
Principle Activities of the Business	
Marketing Strategy	
Countries where Students have been placed	
Total No. of Students placed in last 12 months	
No. of Institutes currently on profile	
British Council Approved	Yes <input type="checkbox"/> No <input type="checkbox"/>
Any other Accreditation	
Office Space in Sq ft	