



REPRESENTATIVE/AGENT APPLICATION FORM

PLEASE TYPE OR PRINT

PART A: ORGANIZATION/ AGENCY AND REPRESENTATIVE/AGENT PROFILE

Organization/Agency Name _____

Headquarter Mailing Address _____

U.S. Office Address _____

Phone _____ Fax _____

E-mail _____ Website _____

AIRC Certified Yes Expiration Date _____ No

REPRESENTATIVE/AGENT CONTACT

Mr. Mrs. Ms.

Name: Family/Last _____ First _____

Title _____

E-mail _____

ORGANIZATION/AGENCY INFORMATION

1. _____
Year established

2. Number of employees 1-5 6-10 10+

3. Type of Business:

Corporation/ Sole Proprietorship Government Agency

Non-Profit

Other _____
Specify

4. List the countries in which you promote study abroad programs.
(attach separate sheet, if necessary)

5. List the universities, schools or private language providers who
you work with in the U.S. (attach separate sheet, if necessary)

6. Which University of California campuses do you represent?
(check all that apply)

- UC Berkeley UC Los Angeles UC Santa Cruz UC Davis
 UC Merced UC San Diego UC Irvine UC Riverside

PART B: CLIENTELE INFORMATION

1. How many students does the organization/agency advise each
year? _____

2. How many students does the organization/agency usually send
abroad to the U.S. each year? _____

3. What types of clients are sent abroad? (check all that apply).

University Students High School or Post High School Students

Travelers Business Professionals

Other _____
Specify

PART C: RECRUITMENT

1. For which types of programs do you recruit?

Professional Certificate

Academic English Business/Professional English

Short-Term Intensive English

Undergraduate Courses

Other _____
Specify

2. Length of time most students want to study abroad.

2-3 weeks 3 months 6 months

9 months 9+ months

3. How do you recruit students?

Ads in Newspapers & Magazines

Posters

Information Libraries

Brochures

Presentations/Fairs

Internet Web Pages

Social Media _____
Specify

Other _____
Specify



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PART D: SERVICES

What services do you provide to your students?

Will your organization/company collect ISP Application, Program and Student Services fees from your students?

Yes No

If YES, representatives/agents send all ISP Application, Program and Student Services fees to UCSB Extension.

If NO, students pay all ISP Application, Program and Student Services fees directly to UCSB Extension.

NOTE: In order for UCSB Extension to pay commission fees to representatives/agents, the following must be on file at UCSB Extension:

- Current Representative/Agent Application
- Current signed Letter of Agreement
- Payment of ISP Application, Program and Student Services fees
- Representative/Agent Commission Invoice.

See [Representative/Agent Commission Invoice](#) for additional information about commission fees

PART E: REFERENCES IN THE U.S. (Please provide 3 references)

1. _____
Organization/Name: Family/Last First

Mailing Address

Phone Fax

E-mail

2. _____
Organization/Name: Family/Last First

Mailing Address

Phone Fax

E-mail

3. _____
Organization/Name: Family/Last First

Mailing Address

Phone Fax

E-mail

PART F: SIGNATURE

Authorized Signer for Organization/Agency Signature

Date

Authorized Signer Name: Family/Last, First

Authorized Signer Title

CONTACT

For submitting ISP Representative/Agent Application Form:

Email, fax, or mail to:

Email: agents@extension.ucsb.edu

Fax: 805.893.4943 Attn: International Student Programs

Mail: UCSB Extension Attn: International Student Programs

University of California, Santa Barbara
Santa Barbara, CA 93106-1110 USA