

Highline College AGENCY APPLICATION

	AGENCI AFFLICATION	
Agency		
Company Name:		
Company Address:		
City & Post Code:		
Country:		
Website:		
Which countries do your studen	ts come from?	
Business Owner/Director		
First name:	Last name:	
Title:	,	
Phone/Cell:	Email:	
Primary Contact for commission	(if different from Owner/Director)	
First name:	Last name:	
Title:	·	

Email:

QUESTIONS & COMPANY PROFILE-Please provide the following information:

Have you sent any students to the U.S. last year? If yes, how many

Phone/Cell:

- 1. How many Washington state 2-year colleges do you work with?
- 2. How many employees do you have and what does your management structure look like?
- 3. Please provide an outline of services the agency offers to students
- 4. Please list the location of the agency's headquarters and list other branch offices

REV: 1/2021

5.	How did you	ı hear ab	out Highline	College or w	ho ref	ferred	you?
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REFERENCES -Please provide us with two college, university and/or language school references we may contact for further information.

First Name:	Last Name:
Title:	College:
Phone:	Email:
First Name:	Last Name:
Title:	College:
Phone:	Email:

Please attach any other supporting information to this application

Thank you for providing us with this information we appreciate your interest in becoming a recruiting partner with Highline College. As soon as we receive this information, we will review it and determine if your agency is a good match for Highline College. We will contact you with additional information, if applicable.

International Student Programs
Phone: 206-592-3725 • Fax: 206-592-3738

MS-ISP 2400 S. 240th St. Des Moines, WA 98198 USA http://international.highline.edu/

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