



Section C: AGENT DETAILS

Full name of the new agency: _____

Best contact email address of the new agency:

Have you notified the existing agent? Yes No Not Applicable

Section D: APPLICANT DECLARATION

I (applicant name) _____ wish to appoint the
services of agency _____ to acting on my
behalf for the application process of (qualification name) _____
at the University of Waikato.

Applicant signature: _____

Parent/Guardian's signature: _____

(If the prospective student is under 18 years old when signing this form then the Parent/Guardian of the prospective student must also agree and sign)

Date (dd/mm/yy): _____

In signing the agreement both parties declare that all information is true and correct. The agent appointment declaration form must be signed and dated at the time the applicant appoints the agency. Failure to return this form to International Office in a timely fashion may result in the agency appointment being denied.

Please also note that if the newly requested agent is not a current recruitment partner of the University of Waikato, the appointment application will be considered after the completion of the university's agent application process.

Please email fully completed form to: agency@waikato.ac.nz or a Waikato Regional Manager/Regional Lead.