



# LAKE WASHINGTON INSTITUTE OF TECHNOLOGY

## International Agent Application

If you are interested in pursuing a partnership with LWTech, please complete this application form and submit it with a copy of your business license with English translation.

**Submit your application to:**

Lake Washington Institute of Technology  
International Programs and Global Education  
Room East 215  
11605 132<sup>nd</sup> Ave NE  
Kirkland, WA 98034

Or Via email: [agents@lwtech.edu](mailto:agents@lwtech.edu)

**For additional information or questions**

Phone: (425) 739-8145  
[agents@lwtech.edu](mailto:agents@lwtech.edu)

### AGENCY INFORMATION

Agency Name: \_\_\_\_\_  
Official or legal name of the agency

Street Address \_\_\_\_\_

Street Address (continued) \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Website URL \_\_\_\_\_

### AGENCY EXECUTIVE

Please provide information about your agency's executive (principal owner, director, or president)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail Address \_\_\_\_\_

Office Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

### AGENCY CONTACT

Use Executive's Info (mark this box if the primary contact person is your agency's executive listed above)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail Address \_\_\_\_\_

Office Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

### AGENCY STATISTICS

Please provide information about your agency's history, licensing, and typical student distribution

Year the agency was established \_\_\_\_\_ Number of students sent to the U.S. last year \_\_\_\_\_

**Which countries do you recruit students from?**

**Countries**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

**Do you have other branch locations?**

Yes  No

**Other Locations**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_

## THE U.S. STUDENT DISTRIBUTION

Approximate number of students your agency sends to the U.S. every year that intend to study the following:

Intensive English Program (IEP) Only	_____
Bachelor's Degree Programs	_____
Associate Degree Programs or Professional Certificates	_____
University Transfer	_____
High School Completion	_____
Short-term or Special Programs	_____

## ADDITIONAL INFORMATION

Please Provide the following additional information.

How did you hear about LWTECH?

- Other educational/recruitment agencies
- Language school
- Teacher, advisor, friend or relative
- Education Fair
- Embassy or consulate
- LWTech website
- Advertisement
- LWTech students
- Other Referral

Please provide the name, location, or URL of the source of your agency's referral to LWTECH

\_\_\_\_\_

Anticipated number of students to LWTech: \_\_\_\_\_

## AGENCY REFERENCES (OPTIONAL)

Please provide 2 references from other U.S. colleges or IEP/ESL programs at public institutions you are currently work with

	REFERENCE 1		REFERENCE 2
Institution:	_____	Institution:	_____
Contact:	_____	Contact:	_____
Phone:	_____	Phone:	_____
Email:	_____	Email:	_____

## AGENT RESPONSIBILITIES

All agents are responsible to provide pre-departure orientation services regarding visa requirements and visa processing, program, options, and travel. In addition, it is the responsibility of all agents to work with LWTech for airport pickup and student housing arrangements.

Please provide a detailed description of how your agency will provide the services mentioned above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## LEGAL SIGNATORY

As an authorized agency signatory, I certify that the information provided in the application form is true and accurate, and I understand that Lake Washington Institute of Technology (LWTECH) reserves the right to terminate any and all relationships with agency or its representatives if LWTECH discovers, or has reasonable suspicion, that any information provided in this application is false or misleading.

\_\_\_\_\_  
Name and Title of signatory (Please Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date