

QA 45 Agent Due Diligence Form

Organisation Profile:

1. Organisation name	Click or tap here to enter text.
2. Organisation address	Click or tap here to enter text.
3. Telephone number	Click or tap here to enter text.
4. Website address	Click or tap here to enter text.
5. Social Media Pages	Click or tap here to enter text.
6. Lead contact person; name, title and email address	Name: Click or tap here to enter text. Title: Click or tap here to enter text. Email address: Click or tap here to enter text.
7. Number of years established	Click or tap here to enter text.
8. Please outline your key business activities	Click or tap here to enter text.
9. Do you have knowledge of the UK Higher Education system?	Yes <input type="checkbox"/> No <input type="checkbox"/>
10. Number of employees	Total number of employees: Click or tap here to enter text. Number of employees who will undertake recruitment/lead generation for Arden University: Click or tap here to enter text.
11. Please detail any agent accredited training or certification your organisation has (e.g. British Council Training)	Name of accreditation/training: Click or tap here to enter text. Copy of certificate provided: Yes <input type="checkbox"/> No <input type="checkbox"/>

Legal Standing and Assessment:

12. Please provide a copy of your company registration certificate	Copy of certificate provided: Yes <input type="checkbox"/> No <input type="checkbox"/> Alternatively, for UK agents only please provide your company number with Companies House: Click or tap here to enter text.
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13. VAT registration number (if applicable)	Number: Click or tap here to enter text.
14. Please specify legal status of your organisation (limited company, sole trader or other)	Click or tap here to enter text.
15. How many branches/offices do you have?	Number: Click or tap here to enter text. Location(s): Click or tap here to enter text.
16. Public Liability Insurance Certificate	Copy of certificate provided: Yes <input type="checkbox"/> No <input type="checkbox"/>
17. Please state any known business or ethical conflict to an arrangement with Arden University	Click or tap here to enter text.

Business Operations:

18. Please provide list of current recruitment arrangements with other HE Providers	Please complete following details:	
	Name of HE Provider:	Number submitted
19. Please outline your target market – geographical area and typical applicant profile	Click or tap here to enter text.	
20. Please state which specific Arden University programmes you would wish to recruit for (if all, then please state this)	Click or tap here to enter text.	
21. Why do you want to add Arden University to the list of institutions you represent? (Please outline Arden University	Click or tap here to enter text.	

strengths in the market you have identified)	
22. Please provide an estimate of annual recruitment to Arden University	
23. Please provide an outline of your marketing initiatives and campaigns	Click or tap here to enter text.
24. What local connections do you have (e.g. schools, colleges, employer networks, British Council, etc)?	Click or tap here to enter text.
25. Do you charge applicants?	<p>For an advisory service: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>if so, please state amount: Click or tap here to enter text.</p> <p>For application support: Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>if so, please state amount: Click or tap here to enter text.</p> <p>Please list any additional services you provide, and the fees charged: Click or tap here to enter text.</p>

Standards - UK Regulation

To determine your training needs, please complete the following:

26. Please confirm level of knowledge and implementation of GDPR (General Data Protection Regulation in the UK)	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>
	Do you have a Privacy Policy? Yes <input type="checkbox"/> No <input type="checkbox"/>
	<p>If so, please provide a copy.</p> <p>Please outline the data security measures your organisation undertakes:</p> <p>Click or tap here to enter text.</p>
27. If you are an international recruitment agent, please confirm	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>

your knowledge of UK visa regulations, this should include Tier 4 and other student visa options	Please state who provides your counsellors with UK visa training and how often is it updated? Click or tap here to enter text.
28. Please confirm level of awareness of the UK Quality Assurance Agency (QAA)	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>
29. Please confirm level of knowledge and awareness of Prevent Responsibility in the UK	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>
30. Please confirm level of knowledge and awareness of UK Bribery Act 2010	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>
31. Please confirm level of knowledge and awareness of Competition and Markets Authority (CMA)	Good <input type="checkbox"/> Sufficient <input type="checkbox"/> Lacking <input type="checkbox"/>

Please complete the following section, **only** if you are a UK agent and prospective students will enter your premise on behalf of Arden University.

32. Please provide a copy of the lease agreement for the premise you occupy	Copy of agreement provided: Yes <input type="checkbox"/> No <input type="checkbox"/> Any comments:
33. Fire Safety (please confirm legal obligation is met for fire and evacuation provision)	Yes <input type="checkbox"/> No <input type="checkbox"/> Any comments:
34. First Aid (please confirm minimum first aid provision and responsibility)	Yes <input type="checkbox"/> No <input type="checkbox"/> Any comments:
35. Disabled Access (please confirm that legal obligations are met in terms of disabled access;	Yes <input type="checkbox"/> No <input type="checkbox"/> Any comments:

lifts, ramps, toilet facilities, parking, etc.)	
36.Safeguarding (please confirm that legal obligations are met in providing a safe environment for people under the age of 18 or 'adults who may be at risk')	Yes <input type="checkbox"/> No <input type="checkbox"/> Any comments:

References

Please supply the name and contact details of two referees from institutions for whom you act as a representative in student recruitment

	Referee 1	Referee 2
Institution Name	Click or tap here to enter text.	Click or tap here to enter text.
Contact Name	Click or tap here to enter text.	Click or tap here to enter text.
Contact Title	Click or tap here to enter text.	Click or tap here to enter text.
Address	Click or tap here to enter text.	Click or tap here to enter text.
Telephone Number	Click or tap here to enter text.	Click or tap here to enter text.
Contact Email Address	Click or tap here to enter text.	Click or tap here to enter text.