**Questionnaire for Prospective International Recruitment Agent**

Faculty of Health and Social Sciences of the University of South Bohemia in České Budějovice (FHSS) is one of the biggest faculties of the university with it’s over 2,000 students. It is most significant in the health and social sphere. The Faculty offers bachelor, master and doctorate degree study fields. Furthermore it has habilitation and inauguration rights.

In order for us to learn about your organisation and suitability for working with us, please use the following questionnaire.

**Contact details:**

|  |  |
| --- | --- |
| **Name (First, Last):** |  |
| **Position:** |  |
| **Agency Name:** |  |
| **E-mail:** |  |
| **Address:** |  |
| **Country:** |  |
| **Telephone:** |  |
| **Head Office address :** |  |
| **Company Website:** |  |

**About your agency:**

|  |  |
| --- | --- |
| 1. Are you an officially licensed agent? (Tick one box only) | |
|  | |
| Yes: | **☐** |
| No: | **☐** |
| Not Applicable: | **☐** |
|  |  |
| If so, please provide a copy of registration certificate | |
|  | |
| 2. Which year was your agency founded? | |
|  | |
| 3.Have you undertaken the British Council agent training program? | |
|  | |
| Yes: | **☐** |
| No: | **☐** |
| Not Applicable: | **☐** |
|  |  |
| 4. How many offices does your agency have? | |
|  | |

5. Please list all office addresses, names of staff, and contact information:

|  |  |  |  |
| --- | --- | --- | --- |
| Office Address: | Contact Person: | Address: | E-mail: |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| 6. What type of programs do you recruit students for? (Tick all that apply) | |
|  | |
| English as Foreign Language: | **☐** |
| Undergraduate in home country: | **☐** |
| Undergraduate Study Abroad: | **☐** |
| Post graduate: | **☐** |
| Other (please specify): | **☐** |

7. Which countries do you currently recruit international students from?

|  |  |  |
| --- | --- | --- |
| Country: | Subject Areas: | No. of students recruited: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

8. Which parts of the world are you active in?

|  |  |  |
| --- | --- | --- |
| Country: | City: | No. of students recruited: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| 9. Do you work with overseas institutions? | |
|  | |
| Yes: | **☐** |
| No: | **☐** |
|  |  |
| (If no, please go to question 10) |  |

If yes, please list the names of the institutions. Please continue on a separate page if needed:

|  |  |  |
| --- | --- | --- |
| Institution: | Country: | Number of students: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

10. How many student inquiries did your agency receive in the last year?

11. What percentage of your students turns into enrolments for institutions?

12. How many students did you send abroad last year?

13. Please provide details on the services you provide for students:

|  |  |
| --- | --- |
| 14. Who do you enter into contract with? (Tick all that apply) | |
|  | |
| Student: | **☐** |
| University: | **☐** |
| Both: | **☐** |
|  |  |
| 15. Do you charge fees to students? (Tick one box only) | |
|  | |
| Yes: | **☐** |
| No: | **☐** |
| If so, how much? |  |
|  |  |

16. Please specify your marketing and recruitment activities?

(Please provide any samples of promotion material currently used by the company to the International Office of the Faculty of Health and Social Sciences)

17. How did you hear about us?

18. Why do you want to represent FHSS?

19. How do you tend to represent FHSS in the regions where you operate?

20. What support will you require from us?

**REFERENCES**

In order to become an official agent of the FHSS we need to obtain a reference. Below, please provide the name of an employee and the name and address of two accredited school institutions you currently work with.

|  |  |
| --- | --- |
| **Name of Institution:** |  |
| **Contact Name:** |  |
| **Address of Institution:** |  |
| **Telephone:** |  |
| **E-mail:** |  |

|  |  |
| --- | --- |
| **Name of Institution:** |  |
| **Contact Name:** |  |
| **Address of Institution:** |  |
| **Telephone:** |  |
| **E-mail:** |  |

**DECLARATION**

I hereby declare that the information provided above is accurate and serves for the sole purposes of the Faculty of Health and Social Sciences of the University of South Bohemia in České Budějovice to assess the potential of the agency to act on behalf of the Faculty in the recruitment of students.

Signature

Name (Please PRINT)

Date

If you have any questions or comments regarding this questionnaire please send an e-mail to zahr@zsf.jcu.cz.