

MOSMAN HIGH SCHOOL SPECIAL PROGRAMS APPLICATION 2026

I wish my son/daughter/ward to be considered for the following program(s): (You may choose more than one box – *please number in order of preference*)

Dance	ATTACH
Drama	РНОТО
	ID
Music (<i>Primary</i> Instrument)	OF STUDENT
Visual Art	
Academic Extension (copy of Year 5 NAPLAN results to be supplied) Please indicate if you would like your student to sit the additional Academic Extension - Maths Accelerated paper Yes / No	
Name of Year 6 Student: DO	B:
Parent(s)/Guardian(s) Name(s):	
Address:	
Suburb: P/code:	
Email:	
Telephone (h): (w): (w):	
Current Primary School:	
Do you have a sibling at Mosman High School? YES / NO	
Name:	
Cost: \$50 per program	
Please pay online using the link below. Select Add item then select genera Special Program. https://portal.schoolbytes.education/other-payment/10	
Receipt #(s): Date Pa	nid: