



Mission Valley ROP
Career Technical Training Center
5019 Stevenson Blvd · Fremont, CA 94538-2449
(510) 657-1865 · Fax (510) 438-0378 · www.mvrop.org

FIELD TRIP AUTHORIZATION

Student Name: _____

Date of Field Trip: _____

The above named student has our permission to attend the field trip as outlined below:

Parent/Guardian Signature

Home School Attendance Office MUST sign

Field Trip Destination

Departure Time

Return Time

Type of Transportation

Field Trip Sponsor

Teachers: Please sign below if you will grant permission for this class absence

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____

STUDENTS: Return this form to the Field Trip Sponsor when completed.
24 Hour notice is required.