

# Texas State Florists Association

## Texas Certified Florist Program

### Application

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Shop Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Shop Phone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email (required): \_\_\_\_\_

TSFA Member:                     YES     NO     Please send Membership Application Information

#### REQUIREMENTS for SUBMITTANCE:

- Completion of Education Application
- 2 Industry Recommendation Letters from different Business sources
- Using the Principles of Design, please Design and Submit  
6 Mechanically Sound Arrangements with a description of the specific Elements within the photos submitted
  - Wedding Bouquet
  - Standing Easel Spray ( front and back )
  - Wired and Taped Corsage
  - Vase Arrangement
  - Basket Arrangement
  - Asymmetrical Arrangement
- One page essay on why you want to be certified.

The Texas Certified Florist Program is a Master Florist Certification requiring a high standard of \*previous education and commitment to the industry prior to enrollment in this program. **If you are not familiar with the Principles of Design, please take the Beginning Online Courses at [www.tsfa.org](http://www.tsfa.org) prior to submitting this application.** With completion of the Texas Certified Florist Program you will have earned the Texas Master Florist title and recognition for your efforts. To be considered for the Texas Certified Florist Program ALL information above must be completed and submitted. In agreement with this statement and the information submitted to the Texas State Florists' Association as being 100% truthful and accurate please sign/date below.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



Texas State Florists' Association:

PO Box 170760

Austin, TX 78717

[txsfa@sbcglobal.net](mailto:txsfa@sbcglobal.net)

p:512-834-0361

f:512-834-2150

( page 1 continue... )

Initial: \_\_\_\_\_

Floral Industry Experience – List all Floral Industry Positions:

SHOP	POSITION	CITY	STATE	# of Years Employed
1.				
2.				
3.				
4.				
5.				

(Please Attach Additional Sheet if Necessary)

If you are an Owner please include:

Floral Nursery Certificate#: \_\_\_\_\_ Sales Tax #: \_\_\_\_\_

Floral Design Teachers and Ag Science Teachers:

SCHOOL	YEARS INSTRUCTING	
	FLORAL DESIGN	COURSES
1.		
2.		
3.		
4.		
5.		

Floral Design Schools Attended:

SCHOOL	YEARS ATTENDED	COURSES
1.		
2.		
3.		
4.		
5.		

Initial: \_\_\_\_\_

Wholesale & Wire Service Education / Hands-On Classes:

NAME OF HOST	DATES ATTENDED	COURSES TITLE
1.		
2.		

Association Floral Education Events Attended:

ORGANIZATION	YEARS ATTENDED
1.	
2.	

Floral Industry Memberships:

1. Texas State Florists' Association YEARS \_\_\_\_\_
2. West Texas New Mexico Association YEARS \_\_\_\_\_
3. Allied Association YEARS \_\_\_\_\_
4. Society of American Florists YEARS \_\_\_\_\_

List the Principles of Design and describe what impact they have on your arrangement.

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List the Elements of Design and describe what impact they have on your arrangement.

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What are your Future Flower Goals after earning this Certification?

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Initial: \_\_\_\_\_

Define what this Certification means to you?

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Rate your Design Skill Level: (scale of 1-5, one being weakest 5 being strongest)

- Wedding Bouquet \_\_\_\_\_
- Standing Easel Spray \_\_\_\_\_
- Vase Arrangement \_\_\_\_\_
- Wired and Taped Corsage \_\_\_\_\_
- Basket Arrangement \_\_\_\_\_
- Asymmetrical \_\_\_\_\_

**\*Provide Photos of EACH rated arrangement to submit with Education Application\***

( See page 1)

- Photos should be on a solid background, white background is preferred.
- They should not be in front of a cooler, etc.
- Please provide a front, back and side view of each arrangement submitted.