Approved Entities

Waiver Number	**105**		
Primary Entity Name	**Volunteers of America-Greater New York, Inc.**		
Primary Address	*340 West 85th Street*	***Primary Phone Number***	*(646) 685-0202*
	New York		
	New York	***Current Waiver Issued Beginning Period***	
	10024-	*7/1/2013*	
		Current Waiver Ending Period	
County	*New York*	*6/30/2016*	

☑ LMSW	☑ CAT	☑ Physical Therapy	☑ Nursing (RN or Nurse Practitioner)
☑ LCSW	☑ Psychology	☑ Occupational Therapy	☐ Medicine (Physician, Physician Asst., Specialist Asst.)
☑ Mental Health Counseling	☐ Optometry	☑ Audiology/Speech Lang.	☐ Other:

Additional Sites if any - with Certificate Number

Certificate Number	**JT - 105 - 117**	**Bronx Early Learning Center**
Certificate Number	**JT - 105 - 118**	**Staten Island Early Learning Center**