
Approved Entities

Waiver Number **1232**

Primary Entity Name **Tourette Syndrome Association Inc**

Primary Address *4240 Bell Boulevard*

Primary Phone *(718) 224-2999*
Number

Bayside

NY

11361-

Current Waiver Issued Beginning Period
7/1/2012

Current Waiver Ending Period
6/30/2015

County *Queens*

Professional Services to be Offered by Qualified Individuals:

<input type="checkbox"/> Licensed Master Social Work	<input type="checkbox"/> Licensed Marriage and Family Therapy	<input type="checkbox"/> Licensed Psychoanalysis
<input checked="" type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input type="checkbox"/> Licensed Mental Health Counseling		

Additional Sites if any - with Certificate Number

Certificate Number

CW - 1232 - 4697

NYC Counseling Program - Tourette Syndrome Association