
Approved Entities

Waiver Number **1288**

Primary Entity Name **Childrens Storefront, The**

Primary Address *70 East 129th Street*

Primary Phone *(212) 427-7900*
Number

New York

NY

10035-

Current Waiver Issued Beginning Period
4/1/2013

Current Waiver Ending Period
3/31/2016

County *NY*

Professional Services to be Offered by Qualified Individuals:

<input checked="" 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	<input type="checkbox"/> Licensed Behavioral Analyst	<input type="checkbox"/> Certified Behavioral Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number

- -