

Approved Entities

Waiver Number **1333**

Primary Entity Name **Washington Heights Child Care Center**

Primary Address *610-14 West 175th Street*

Primary Phone Number *(212) 781-6910*

New York

Current Waiver Issued Beginning Period

NY

4/1/2013

10033-

Current Waiver Ending Period

County *NY*

3/31/2016

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 type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input checked="" 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 - -