Approved Entities

Waiver Number	**177**		
Primary Entity Name	**Jungian Psychoanalytic Association**		
Primary Address	*9 West 31st St #18B*	***Primary Phone Number***	*(718) 374-5120*
	New York		
	NY	***Current Waiver Issued Beginning Period***	
	10001-	*3/15/2012*	
		Current Waiver Ending Period	
County	*New York*	*3/31/2015*	

Professional Services to be Offered by Qualified Individuals:

☐ Licensed Master Social Work	☐ Licensed Marriage and Family Therapy	☑ Licensed Psychoanalysis
☐ Licensed Clinical Social Work	☐ Licensed Creative Arts Therapy	☐ Psychology
☐ Licensed Mental Health Counseling		

Additional Sites if any - with Certificate Number

Certificate Number	**CW - 177 - 23**	**Jungian Psychanalytic Association**
Certificate Number	**CW - 177 - 22**	**Jungian Psychanalytic Association**