Approved Entities

Waiver Number	**267**		
Primary Entity Name	**Colonial Youth and Family Services**		
Primary Address	*1235 Montauk Highway*	***Primary Phone Number***	*(631) 281-4461*
	Mastic		
	NY	***Current Waiver Issued Beginning Period***	
	11950-	*7/1/2015*	
		Current Waiver Ending Period	
County	*Suffolk*	*6/30/2018*	

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	☐ Licensed Behavior Analyst	☐ Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number	- -