Approved Entities

Waiver Number	**346**		
Primary Entity Name	**Settlement Housing Fund Inc.**		
Primary Address	*247 West 37th St, 4th Fl*	***Primary Phone Number***	*(212) 265-6530*
	New York		
	NY	***Current Waiver Issued Beginning Period***	
	10018-	*3/15/2015*	
		Current Waiver Ending Period	
County	*New York*	*3/31/2018*	

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	**CW - 346 - 759**	**DREAM Ged Youthbuild Training Program**
Certificate Number	**CW - 346 - 758**	**Semiperm Program**