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## *Approved Entities*

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**Waiver Number**                    **367**

**Primary Entity Name**            **Green Chimneys Children's Services Inc**

**Primary Address**                *400 Doansburg Rd Box 719*

**Primary Phone Number**        *(845) 279-2995*

*Brewster*

**Current Waiver Issued Beginning Period**

*NY*

*11/1/2013*

*10509-*

**Current Waiver Ending Period**

**County**

*Putnam*

*10/31/2016*

**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 checked="" type="checkbox"/> Licensed Clinical Social Work	<input checked="" type="checkbox"/> Licensed Creative Arts Therapy	<input checked="" type="checkbox"/> Psychology
<input checked="" type="checkbox"/> Licensed Mental Health Counseling		

**Additional Sites if any - with Certificate Number**

**Certificate Number**

**CW - 367 - 799**

**Community Based Service**