
Approved Entities

Waiver Number **408**

Primary Entity Name **The New Rochelle Day Nursery Inc.**

Primary Address *115 Clinton Ave*

Primary Phone Number *(914) 632-2093*

New Rochelle

Current Waiver Issued Beginning Period

NY

7/9/2015

10801-

Current Waiver Ending Period

County *Westchester*

7/8/2018

Professional Services to be Offered by Qualified Individuals:

<input 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 type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input type="checkbox"/> Licensed Mental Health Counseling	<input type="checkbox"/> Licensed Behavior Analyst	<input type="checkbox"/> Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number

- -