

## Approved Entities

**Waiver Number**                      **523**  
**Primary Entity Name**                **Center for the Integration & Advancement of New Americans, Inc. (CIANA)**  
**Primary Address**                    *31-09 Newtown Avenue*                      **Primary Phone**                *(718) 545-4040*  
    *Suite 411*    **Number**  
    *Astoria*  
    *NY*    **Current Waiver Issued Beginning Period**  
    *11102-*    *4/1/2012*  
       **Current Waiver Ending Period**  
**County**                                      *Queens*    *3/31/2015*

**Professional Services to be Offered by Qualified Individuals:**

<input checked="" type="checkbox"/> Licensed Master Social Work	<input checked="" type="checkbox"/> Licensed Marriage and Family Therapy	<input checked="" 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**                      - -