Approved Entities

Waiver Number	**558**		
Primary Entity Name	**Interfaith Partnership for the Homeless**		
Primary Address	*176 Sheridan Avenue*	***Primary Phone Number***	*(518) 434-8021*
	Albany		
	NY	***Current Waiver Issued Beginning Period***	
	12210-	*7/30/2015*	
		Current Waiver Ending Period	
County	*Albany*	*7/29/2018*	

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 - 558 - 1959**	**Interfaith Housing Program**
Certificate Number	**CW - 558 - 1957**	**Sheridan Hollow Drop-In Center**