Approved Entities

Waiver Number	**605**		
Primary Entity Name	**Hospital Clinic Home Center Instructional Corporation**		
Primary Address	*1419-23 Broadway*	***Primary Phone Number***	*(718) 443-3917*
	Brooklyn		
	NY	***Current Waiver Issued Beginning Period***	
	11221-	*4/1/2015*	
		Current Waiver Ending Period	
County	*Kings*	*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	- -