Approved Entities

Waiver Number	**630**		
Primary Entity Name	**Sponsors for Educational Opportunity, Inc**		
Primary Address	*55 Exchange Place*	***Primary Phone Number***	*(646) 435-9580*
	New York		
	NY	***Current Waiver Issued Beginning Period***	
	10005-	*7/30/2015*	
		Current Waiver Ending Period	
County	*New York*	*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	- -