
Approved Entities

Waiver Number **680**

Primary Entity Name **Southern Tier Independence Center Inc.**

Primary Address *135 East Frederick Street* **Primary Phone** *(607) 724-2111*
Number

Binghamton **Current Waiver Issued Beginning Period**
 NY *4/15/2012*
 13904- **Current Waiver Ending Period**
County *Broome* *4/30/2015*

Professional Services to be Offered by Qualified Individuals:

<input checked="" 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 checked="" type="checkbox"/> Licensed Mental Health Counseling		

Additional Sites if any - with Certificate Number

Certificate Number	CW - 680 - 2610	Traumatic Brain Injury Neurobehavioral Resource Project
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