
Approved Entities

Waiver Number **738**

Primary Entity Name **Sisterhood Mobilized for AIDS/HIV Research and Treatment Inc**

Primary Address *1751 Park Ave, 4th Fl*

Primary Phone Number *(212) 633-2500*

New York

Current Waiver Issued Beginning Period

NY

6/1/2012

10035-

Current Waiver Ending Period

County

New York

5/31/2015

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

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