Approved Entities

Waiver Number	**761**		
Primary Entity Name	**African American Planning Commission, Inc.**		
Primary Address	*P.O. Box 330-707*	***Primary Phone Number***	*(718) 218-7254*
	Brooklyn		
	NY	***Current Waiver Issued Beginning Period***	
	11233-	*5/10/2012*	
		Current Waiver Ending Period	
County	*Kings*	*5/9/2015*	

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		

Additional Sites if any - with Certificate Number

Certificate Number	- -