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## *Approved Entities*

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**Waiver Number**                    **826**

**Primary Entity Name**            **Year Up, Inc.**

**Primary Address**                *93 Summer Street*                    **Primary Phone**            *(617) 542-1533*  
*5th floor*                                    **Number**  
*Boston*  
*MA*                                            **Current Waiver Issued Beginning Period**  
*02110-*                                        *4/1/2013*  
**County**                                *Suffolk*                                    **Current Waiver Ending Period**  
*3/31/2016*

**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 type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input type="checkbox"/> Licensed Mental Health Counseling		

**Additional Sites if any - with Certificate Number**

<b>Certificate Number</b>	<b>CW - 826 - 3166</b>	<b>Year Up - New York</b>
<b>Certificate Number</b>	<b>CW - 826 - 3165</b>	<b>Year Up - New York</b>