Approved Entities

Waiver Number	**869**		
Primary Entity Name	**The Korean American Family Service Center Inc**		
Primary Address	*P.O. Box 541419* *Flushing* *NY* *11354-*	***Primary Phone Number***	*(718) 460-3801* *10*
		Current Waiver Issued Beginning Period	*3/15/2015*
		Current Waiver Ending Period	*3/31/2018*
County	*Queens*		

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	**CW - 869 - 6512**	**Hodori "Little Tiger" After School Program**
Certificate Number	**CW - 869 - 6021**	**Rainbow House "safe dwelling" shelter program**