# Approved Entities

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|---|---|---|---|
| ***Waiver Number*** | **961** | | |
| ***Primary Entity Name*** | **National Multiple Sclerosis Society New York City Southern New York Chapter** | | |
| ***Primary Address*** | *733 Third Avenue 3rd Fl* | ***Primary Phone Number*** | *(212) 463-7787* |
| | *New York* | | |
| | *NY* | ***Current Waiver Issued Beginning Period*** | |
| | *10017-* | *7/1/2012* | |
| | | ***Current Waiver Ending Period*** | |
| ***County*** | *New York* | *6/30/2015* | |

**Professional Services to be Offered by Qualified Individuals:**

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|---|---|---|
| ☑ 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***

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|---|---|
| ***Certificate Number*** | - - |