



THE STATE EDUCATION DEPARTMENT / THE UNIVERSITY OF THE STATE OF NEW YORK / ALBANY, NY 12234

Division of Professional Education
Professional Education Program Review
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September 15, 2015

Sarit Rubenstein
Magenu
44 Wall Street, 2nd Floor
New York, NY 10005

Provider ID# 10690

Dear Ms. Rubenstein:

I am writing in response to the Reapplication for Approval and Provider Agreement that was submitted on behalf of Magenu a review of this document and supporting materials has now been completed. I am pleased to inform you that you have been reapproved as a provider of the training in the identification and reporting of child abuse and maltreatment.

Pursuant to Section 57.3(a) of the Regulations of the Commissioner of Education, this approval is valid for a two-year period through 9/30/2017. At the expiration of this period, you may reapply to the State Education Department for approval as a provider. Magenu's approval may be terminated by the Department, pursuant to Section 57.5(b) of the Commissioner's Regulations, if the coursework offered is inadequate, incomplete or otherwise unsatisfactory. Termination may also result from noncompliance with the Provider Agreement if the provider's capability to offer the training no longer exists.

This notification constitutes re-approval to offer the mandated coursework in child abuse identification and reporting in live lecture presentation under the terms and conditions of the Reapplication for Approval and Provider Agreement. Prior to any major modifications made to the coursework or its presentation, which may affect those terms and conditions, including mode of delivery, separate approval must be obtained from the New York State Education Department.

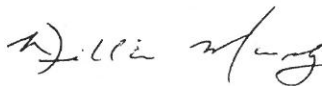
The New York State Office of Children and Family Services (OCFS) and the Buffalo State College Center for the Development of Human Services Syllabus on the Identification and Reporting of Child Abuse and Maltreatment/Neglect, must be utilized.

Please continue to use the New York State Education Department Certifications of Completion forms. A closely monitored distribution of these forms is essential to accurate record keeping for individuals receiving the training. Providers will need to duplicate the Certificate of Completion form as needed and continue to provide the trainee with the original and one copy.

Providers must continue to maintain a hard copy or electronic record of the Certificate for not less than five years from the date the course was completed. Please note that the Provider Identification Number must be included on all authorized Certifications of Completion. Please store the Certification of Completion forms in a secure location. Should you ever wish to write or call, please make reference to your Provider Identification Number. This will assist our office in responding to your inquiry.

Once again, I would like to congratulate Magenu's on its re-approval as a provider of this training. I would also like to thank you for your past endeavors in helping us implement this important training. With your continual help and cooperation I am confident of our success in providing the coursework for all individuals in need of the training. If you have any questions about your approval as a provider or have, any questions about the receipt of the syllabus or need additional copies, please contact the Office of Professional Education Program Review at (518) 474-3817, ext. 360 or via email, OPPLEUCA@nysed.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "William Murphy". The signature is written in a cursive style with a large initial "W".

William Murphy
Director