



# Certificate of Licensure

**Issued to:** THE CHILDREN'S SERVICE CENTER OF WYOMING VALLEY

**Facility No.:** 407081

**Type:** FULL

**THIS CERTIFICATE AUTHORIZES**

THE CHILDREN'S SERVICE CENTER OF WYOMING VALLEY INC.  
20 NORTH LAUREL STREET  
HAZLETON, PA 18201

**To Provide The Following Drug and Alcohol Activities Up To The Identified Maximum Number Of Persons**  
Outpatient (70)

**Approval Date:** July 01, 2025

**Expiration Date:** June 30, 2026



**Pennsylvania  
Department of Drug and  
Alcohol Programs**

A handwritten signature in black ink, reading "Latika Davis-Jones".

*Latika Davis-Jones, PhD, MPH, MSW  
Secretary of Drug and Alcohol Programs*

NOTE: THIS CERTIFICATE OF LICENSURE IS ISSUED TO THE ORGANIZATION NAMED ABOVE AND IS FOR THE PREMISES AND FACILITY NAMED AND IS NOT TRANSFERRABLE.