

AIR FORCE DISCHARGE REVIEW BOARD HEARING RECORD

NAME OF SERVICE MEMBER (LAST, FIRST MIDDLE INITIAL) []		GRADE SRA	AFSN/SSAN []			
TYPE GEN	PERSONAL APPEARANCE	X	RECORD REVIEW			
COUNSEL		ADDRESS AND OR ORGANIZATION OF COUNSEL				
YES	No					
	X					
MEMBER SITTING []		VOTE OF THE BOARD				
		HON	GEN	UOTHC	OTHER	DENY
						X
						X
						X
						X
ISSUES	INDEX NUMBER	EXHIBITS SUBMITTED TO THE BOARD				
A94.05	A66.00	1	ORDER APPOINTING THE BOARD			
		2	APPLICATION FOR REVIEW OF DISCHARGE			
		3	LETTER OF NOTIFICATION			
		4	BRIEF OF PERSONNEL FILE			
			COUNSEL'S RELEASE TO THE BOARD			
			ADDITIONAL EXHIBITS SUBMITTED AT TIME OF PERSONAL APPEARANCE			
			TAPE RECORDING OF PERSONAL APPEARANCE HE			
HEARING DATE	CASE NUMBER					
25 Jan 2007	FD-2006-00213					
<small>APPLICANT'S ISSUE AND THE BOARD'S DECISIONAL RATIONALE ARE DISCUSSED ON THE ATTACHED AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE</small>						
<p>Case heard in Washington, D.C.</p> <p>Advise applicant of the decision of the Board, the right to a personal appearance with/without counsel, and the right to submit an application to the AFBCMR</p> <p>Names and votes will be made available to the applicant at the applicant's request.</p> 						
INDORSEMENT				DATE: 2/6/2007		
TO:		FROM:				
SAF/MRBR 550 C STREET WEST, SUITE 40 RANDOLPH AFB, TX 78150-4742		SECRETARY OF THE AIR FORCE PERSONNEL COUNCIL AIR FORCE DISCHARGE REVIEW BOARD 1535 COMMAND DR, EE WING, 3RD FLOOR ANDREWS AFB, MD 20762-7002				

GENERAL: The applicant appeals for upgrade of discharge to honorable.

The applicant was offered a personal appearance before the Discharge Review Board (DRB) but declined to exercise this right.

The attached brief contains available pertinent data on the applicant and the factors leading to the discharge.

FINDINGS: Upgrade of discharge is denied.

The Board finds that neither the evidence of record nor that provided by the applicant substantiates an inequity or impropriety that would justify a change of discharge.

ISSUE:

Although not explicitly stated, applicant contends his discharge was inequitable because it was too harsh. The records indicated the applicant received a General discharge for misconduct (drug abuse). The Board concluded the misconduct was a significant departure from conduct expected of all military members. The characterization of the discharge received by the applicant was found to be appropriate.

CONCLUSIONS: The Discharge Review Board concludes that the discharge was consistent with the procedural and substantive requirements of the discharge regulation and was within the discretion of the discharge authority and that the applicant was provided full administrative due process.

In view of the foregoing findings, the Board further concludes that there exists no legal or equitable basis for upgrade of discharge, thus the applicant's discharge should not be changed.

Attachment:
Examiner's Brief

DEPARTMENT OF THE AIR FORCE
AIR FORCE DISCHARGE REVIEW BOARD
ANDREWS AFB, MD

(Former SRA) (HGH SRA)

1. **MATTER UNDER REVIEW:** Appl rec'd a GEN Disch fr USAF Malmstrom AFB, MT on 17 May 05 UP AFI 36-3208, para 5.54 (Misconduct - Drug Abuse). Appeals for Honorable Discharge.

2. **BACKGROUND:**

a. DOB: 5 Oct 81. Enlmt Age: 19 6/12. Disch Age: 23 6/12. Educ: HS DIPL. AFQT: N/A. A-51, E-45, G-50, M-37. PAFSC: 3P051 - Security Forces Journeyman. DAS: 31 Oct 01.

b. Prior Sv: (1) AFRes 12 May 01 - 21 May 01 (10 days) (Inactive).

3. **SERVICE UNDER REVIEW:**

a. Enlisted as AB 22 May 01 for 4 yrs. Svd: 03 Yrs 11 Mo 27 Das, all AMS.

b. Grade Status: SRA - 22 May 04
A1C - 22 Sep 02
Amn - 22 Nov 01

c. Time Lost: None.

d. Art 15's: None.

e. Additional: None.

f. CM: None.

g. Record of SV: 22 May 01 - 21 Jan 03 Malmstrom AFB 5 (Initial)
22 Jan 03 - 21 Jan 04 Malmstrom AFB 4 (Annual)
22 Jan 04 - 21 Jan 05 Malmstrom AFB 5 (Annual)

h. Awards & Decs: NDSM, AFTR, AFOUA W/3 OLCS, GWOTSM, AFGCM.

i. Stmt of Sv: TMS: (04) Yrs (00) Mos (06) Das
TAMS: (03) Yrs (11) Mos (27) Das

4. **BASIS ADVANCED FOR REVIEW:** Appln (DD Fm 293) dtd 13 May 06.
(Change Discharge to Honorable)

ISSUES ATTACHED.

ATCH

1. Applicant's Issues.
2. Certificate of Recognition.
3. Letter of Appreciation.
4. Three Enlisted Performance Reports.

10JUL06/ia

APPLICATION FOR THE REVIEW OF DISCHARGE FROM THE ARMED FORCES OF THE UNITED STATES (Please read instructions on Pages 3 and 4 BEFORE completing this application.)

OMB No. 0704-0004 OMB approval expires Aug 31, 2006

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Service Directorate (0704-0004). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE APPROPRIATE ADDRESS ON BACK OF THIS PAGE.

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 1553; E.O. 9397.

PRINCIPAL PURPOSE(S): To apply for a change in the characterization or reason for military discharge issued to an individual.

ROUTINE USE(S): None.

DISCLOSURE: Voluntary; however, failure to provide identifying information may impede processing of this application. The request for Social Security Number is strictly to assure proper identification of the individual and appropriate records.

1. APPLICANT DATA (The person whose discharge is to be reviewed). PLEASE PRINT OR TYPE INFORMATION.

a. BRANCH OF SERVICE (X one) ARMY MARINE CORPS NAVY AIR FORCE COAST GUARD
b. NAME (Last, First, Middle Initial)
c. GRADE/RANK AT DISCHARGE E-4/SENIOR AIRMAN
d. SOCIAL SECURITY NUMBER

2. DATE OF DISCHARGE OR SEPARATION (YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149) 2005, MAY 17
4. DISCHARGE CHARACTERIZATION RECEIVED (X one) HONORABLE GENERAL/UNDER HONORABLE CONDITIONS UNDER OTHER THAN HONORABLE CONDITIONS
5. BOARD ACTION REQUESTED (X one) CHANGE TO HONORABLE CHANGE TO GENERAL/UNDER HONORABLE CONDITIONS CHANGE TO UNCHARACTERIZED (Not applicable for Air Force) CHANGE NARRATIVE REASON FOR SEPARATION TO:

3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION 341 SFS MALINSTROM AFB, MT
6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST (Continue in Item 14. See instructions on Page 3.) I believe that in all actuality I served my enlistment honorably. I smoked marijuana after completely outgrossing Malinstrom AFB and was already 2 weeks into terminal leave. Though technically I was still in the military I figured I was just on leave and never returning back to active duty. I made a terrible mistake and I took full responsibility for my actions. CONTD. ->

7. (X if applicable) AN APPLICATION WAS PREVIOUSLY SUBMITTED ON (YYYYMMDD) AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE. N/A

8. IN SUPPORT OF THIS APPLICATION, THE FOLLOWING ATTACHED DOCUMENTS ARE SUBMITTED AS EVIDENCE: (Continue in Item 17. If military documents or medical records are relevant to your case, please send copies.) I have enclosed my enlisted performance reports as well as other documents to show that my enlistment was nothing but honorable until one mistake was made which I am paying for and accept full responsibility for.

9. TYPE OF REVIEW REQUESTED (X one)
[X] CONDUCT A RECORD REVIEW OF MY DISCHARGE BASED ON MY MILITARY PERSONNEL FILE AND ANY ADDITIONAL DOCUMENTATION SUBMITTED BY ME. I AND/OR (counsel/representative) WILL NOT APPEAR BEFORE THE BOARD.
I AND/OR (counsel/representative) WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE THE BOARD IN THE WASHINGTON, D.C. METROPOLITAN AREA.
I AND/OR (counsel/representative) WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE A TRAVELING PANEL CLOSEST TO (enter city and state) (NOTE: The Navy Discharge Review Board does not have a traveling panel.)

10. a. COUNSEL/REPRESENTATIVE (if any) NAME (Last, First, Middle Initial) AND ADDRESS (See Item 10 of the instructions about counsel/representative.) N/A
b. TELEPHONE NUMBER (Include Area Code)
c. E-MAIL
d. FAX NUMBER (Include Area Code)

11. APPLICANT MUST SIGN IN ITEM 13.a. BELOW. If the record in question is that of a deceased or incompetent person, LEGAL PROOF OF DEATH OR INCOMPETENCY MUST ACCOMPANY THE APPLICATION. If the application is signed by other than the applicant, indicate the name (print) and relationship by marking a box below.
[] SPOUSE [] WIDOW [] WIDOWER [] NEXT OF KIN [] LEGAL REPRESENTATIVE [] OTHER (Specify)

12. a. CURRENT MAILING ADDRESS OF APPLICANT OR PERSON ABOVE (Forward notification of any change in address.)
b. TELEPHONE NUMBER (Include Area Code)
d. FAX NUMBER (Include Area Code)

13. CERTIFICATION. I make the foregoing statements, as part of my claim, with full knowledge of the penalties involved for willfully making a false statement or claim. (U.S. Code, Title 18, Sections 287 and 1001, provide that an individual shall be fined under this title or imprisoned not more than 5 years, or both.)
a. DATE SIGNED - REQUIRED (YYYYMMDD) 2006, MAY 13
b. DATE SIGNED - REQUIRED (YYYYMMDD)
CASE NUMBER (Do not write in this space.) FD2006-00213

14. CONTINUATION OF ITEM 8, ISSUES (If applicable)

I COOPERATED FULLY WITH AFOSI AS WELL AS WITH MY SQUADRON. THIS WAS A HORRIBLE MISTAKE I MADE AND I AM PAYING FOR IT DEARLY. IT SEEMS NO ONE WILL HIRE ME AND I ASSUME THIS IS THE REASON. I HAVE A WIFE + DAUGHTER TO SUPPORT AND ITS REALLY HARD FOR ME TO GET A GOOD PAYING JOB TO HELP ME TO THIS WITHOUT AN HONORABLE DISCHARGE. I AM A DISABLED VET WITH BACK + KNEE PROBLEMS AND I AM CONSTANTLY IN PAIN. I WAS TIRED OF TAKING PAINKILLERS ALL DAY SO I TRIED MARIJUANA BECAUSE I HEARD IT HELPED WITH PAIN AND NOW I AM PAYING DEARLY FOR MY MISTAKES, IN MY MIND TERMINAL LEAVE WAS THE SAME AS NOT BEING IN THE MILITARY ANYMORE. PLEASE LOOK AT MY SERVICE RECORD AND YOU WILL SEE I WAS A STEAR TROOP MY WHOLE ENVIEMENT UNTIL TERMINAL LEAVE STARTER. PLEASE GRANT ME AN HONORABLE DISCHARGE
THANK YOU.

15. CONTINUATION OF ITEM 8, SUPPORTING DOCUMENTS (If applicable)

ENCLOSED IS 3 EPR'S, A FIRST SGT'S. AWARD AND A NEW YORK STATE CERTIFICATE OF APPRECIATION FROM THE SQUAD. THIS SHOULD TELL YOU ABOUT MY CHARACTER.

16. REMARKS (If applicable)

MAIL COMPLETED APPLICATIONS TO APPROPRIATE ADDRESS BELOW.

ARMY

Army Review Boards Agency
Support Division, St. Louis
9700 Page Avenue
St. Louis, MO 63132-5200
(See <http://arba.army.pentagon.mil>)

NAVY AND MARINE CORPS

Naval Council of Personnel Boards
720 Kennon Street, S.E.
Room 309 (NDRB)
Washington Navy Yard, DC 20374-5023

AIR FORCE

Air Force Review Boards Agency
SAF/MRBR
550-C Street West, Suite 40
Randolph AFB, TX 78150-4742

COAST GUARD

U.S. Coast Guard
Commandant (G-WPM)
2100 Second Street, S.W. Room 5500
Washington, DC 20593



DEPARTMENT OF THE AIR FORCE
HEADQUARTERS 341ST SPACE WING (AFSPC)

PD7006-00213

10 May 05
(Date)

MEMORANDUM FOR 341 SFS (ATTN: SrA:)

FROM: 341 SFS/CC

SUBJECT: Notification Memorandum

1. Pursuant to AFPD 36-32, *Military Retirements and Separations*, and AFI 36-3208, *Administrative Separation of Airmen*, paragraph 5.54, I am recommending your discharge from the United States Air Force for drug abuse. This action could result in your separation with an under other than honorable conditions discharge. I am recommending a general discharge.

2. My reasons for this action are:

On divers occasions between 2 Apr 05 and 10 Apr 05, you wrongfully used marijuana. As further evidence of this drug use see attached report of investigation by OSI received 9 May 05 which includes a positive urinalysis report dated 15 Apr 05.

3. Copies of the documents to be forwarded to the separation authority in support of this recommendation are attached. The commander exercising Special Court-Martial jurisdiction or a higher authority will decide whether you will be discharged or retained in the Air Force and, if you are discharged, how your service will be characterized. If you are discharged, you will be ineligible for reenlistment in the Air Force and any special pay, bonus, or education assistance funds may be subject to recoupment.

4. You have the right to consult counsel. Military legal counsel has been obtained to assist you. I have made an appointment for you to consult the Area Defense Counsel, x4723, 7015 Goddard Drive, Bldg 145, Room 144 on 11 May 05 at 0900. You may consult civilian counsel at your own expense.

5. You have the right to submit statements in your own behalf. Any statements you want the separation authority to consider must reach me by COB 13 May 05 (3 duty days) unless you request and receive an extension for good cause shown. I will send all submitted statements to the separation authority.

6. If you fail to consult counsel or to submit statements in your own behalf, your failure will constitute a waiver of your right to do so.

7. You have been scheduled for a medical examination. You must report to the 341st Medical Group Force Health Management Section, x4405, at N/A hours on N/A for the examination. You **MUST** be in uniform for this appointment. If you wear glasses, you must also bring them to this appointment.

FOR OFFICIAL USE ONLY

Guardians of the High Frontier

8. Any personal information you furnish in rebuttal is covered by the Privacy Act of 1974. A copy of AFI 36-3208, *Administrative Separation of Airmen*, is available for your use at your orderly room.

9. Execute the attached acknowledgement and return it to me immediately.



Commander, 341st Security Forces Squadron

Attachments:

1. Supporting documents:
 - a. Report of Investigation received 9 May 05, 22 pages
2. Airman's Receipt of Notification Memorandum