

AIR FORCE DISCHARGE REVIEW BOARD HEARING RECORD

NAME OF SERVICE MEMBER (LAST, FIRST MIDDLE INITIAL)	GRADE	AFSN/SSAN
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TYPE GEN		PERSONAL APPEARANCE	X	RECORD REVIEW								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">COUNSEL</td> <td style="width: 50%; padding: 2px;">NAME OF COUNSEL AND OR ORGANIZATION</td> </tr> <tr> <td style="padding: 2px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">YES</td> <td style="width: 50%; padding: 2px;">No</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: center;">X</td> </tr> </table> </td> <td style="padding: 2px;"></td> </tr> </table>	COUNSEL	NAME OF COUNSEL AND OR ORGANIZATION	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;">YES</td> <td style="width: 50%; padding: 2px;">No</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px; text-align: center;">X</td> </tr> </table>	YES	No		X		ADDRESS AND OR ORGANIZATION OF COUNSEL			
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YES	No											
	X											

MEMBER SITTING	HON	GEN	UOTHC	OTHER	DENY
					X+
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					X+

ISSUES A94.53	INDEX NUMBER A67.05	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="padding: 2px;">EXHIBITS SUBMITTED TO THE BOARD</th> </tr> <tr><td style="width: 20px; text-align: center; padding: 2px;">1</td><td style="padding: 2px;">ORDER APPOINTING THE BOARD</td></tr> <tr><td style="text-align: center; padding: 2px;">2</td><td style="padding: 2px;">APPLICATION FOR REVIEW OF DISCHARGE</td></tr> <tr><td style="text-align: center; padding: 2px;">3</td><td style="padding: 2px;">LETTER OF NOTIFICATION</td></tr> <tr><td style="text-align: center; padding: 2px;">4</td><td style="padding: 2px;">BRIEF OF PERSONNEL FILE</td></tr> <tr><td colspan="2" style="padding: 2px;">COUNSEL'S RELEASE TO THE BOARD</td></tr> <tr><td colspan="2" style="padding: 2px;">ADDITIONAL EXHIBITS SUBMITTED AT TIME OF PERSONAL APPEARANCE</td></tr> <tr><td colspan="2" style="padding: 2px;">TAPE RECORDING OF PERSONAL APPEARANCE HEARING</td></tr> </table>	EXHIBITS SUBMITTED TO THE BOARD		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 HEARING	
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HEARING DATE 16 Jun 2011	CASE NUMBER FD-2009-00687																	

APPLICANT'S ISSUE AND THE BOARD'S DECISIONAL RATIONALE ARE DISCUSSED ON THE ATTACHED AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE

Case heard in Washington, D.C.

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.

Names and votes will be made available to the applicant at the applicant's request.

+ RE CODE

TO:
SAF/MRBR
550 C STREET WEST, SUITE 40
RANDOLPH AFB, TX 78150-4742

FROM:
SECRETARY OF THE AIR FORCE PERSONNEL COUNCIL
AIR FORCE DISCHARGE REVIEW BOARD
1535 COMMAND DR, EE WING, 3RD FLOOR
ANDREWS AFB, MD 20762-7001

AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE

GENERAL: The applicant appeals for upgrade of discharge to honorable and to change the reenlistment code.

The applicant was offered a personal appearance before the Discharge Review Board (DRB) but declined and requests that the review be completed based on the available service record.

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

FINDING: The Board denies the upgrade of the discharge and change of reenlistment code.

ISSUE: Applicant received a General discharge for Misconduct—A pattern of Misconduct: Discreditable Involvement with Military or Civil Authorities

Applicant submitted no issues regarding the inequity or impropriety of his discharge. The applicant does admit he made mistakes during his military career and requests an upgrade in order to provide a better life for his family. The record indicates the applicant received one Article 15, and two Letters of Reprimand. His misconduct included misuse of his Government Travel Card, disorderly conduct, operated a motor vehicle while ability to drive was impaired by alcohol, failure to carry his driver's license, and failure to complete the Alcohol & Drug Abuse Prevention & Treatment Program. The Board recognized the fact that the applicant had served seven years total service before the discharge was initiated, but concluded the applicant's misconduct outweighed the positive aspects of his time in the Air Force. The Board noted the applicant was entitled to request an administrative discharge board, but waived his right in order to receive a General discharge. The Board reviewed the entire record and found no evidence of impropriety or inequity to warrant an upgrade of the discharge.

The applicant cited his desire to receive the G.I. Bill benefits as justification for upgrade. The DRB noted that when the applicant applied for these benefits, he signed a statement (DD Form 2366, on September 24, 2001) that he understood he must receive an Honorable discharge to receive future educational entitlements. The Board was sympathetic to the impact the loss of these benefits was having on the applicant, but this is not a matter of inequity or impropriety which would warrant an upgrade.

CONCLUSION: 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 the applicant was provided full administrative due process.

Attachment:
Examiner's Brief

APPLICATION FOR THE REVIEW OF DISCHARGE OR DISMISSAL FROM THE ARMED FORCES OF THE UNITED STATES

(Please read instructions on Pages 3 and 4 BEFORE completing this application.)

Form Approved
OMB No. 0704-0004
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 Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports (0704-0004), 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302. 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 ADDRESS. 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	<input checked="" type="checkbox"/> AIR FORCE	COAST GUARD
b. NAME (Last, First, Middle Initial)	c. GRADE/RANK AT DISCHARGE		d. SOCIAL SECURITY NUMBER		
	E-4/A1C				

2. DATE OF DISCHARGE OR SEPARATION

(YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149)

20081014

4. DISCHARGE CHARACTERIZATION RECEIVED (X one)

<input type="checkbox"/> HONORABLE
<input checked="" type="checkbox"/> GENERAL/UNDER HONORABLE CONDITIONS
<input type="checkbox"/> UNDER OTHER THAN HONORABLE CONDITIONS
<input type="checkbox"/> BAD CONDUCT (Special court-martial only)
<input type="checkbox"/> UNCHARACTERIZED
<input type="checkbox"/> OTHER (Explain)

5. BOARD ACTION REQUESTED (X one)

<input checked="" type="checkbox"/> CHANGE TO HONORABLE
<input type="checkbox"/> CHANGE TO GENERAL/UNDER HONORABLE CONDITIONS
<input type="checkbox"/> CHANGE TO UNCHARACTERIZED (Not applicable for Air Force)
<input type="checkbox"/> CHANGE NARRATIVE REASON FOR SEPARATION TO:

3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION

25TH/MOODY AFB

6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST (Continue in item 14. See instructions on Page 3.)

I MADE SOME MISTAKES IN MY MILITARY CAREER THAT I AM NOT PROUD OF. I WOULD REALLY LIKE TO GET A BETTER LIFE FOR MY FAMILY AND MYSELF WHICH REQUIRES FOR ME TO GET A COLLEGE EDUCATION. I WOULD REALLY LIKE TO FINISH OUT MY DEGREE. I REALLY ENJOYED SERVING MY COUNTRY AND I WOULD DO IT AGAIN AT THE DROP OF A DIME BUT, AT THIS PRESENT DAY AND TIME I AM NOT ABLE TO DO THAT.

7. (X if applicable) AN APPLICATION WAS PREVIOUSLY SUBMITTED ON (YYYYMMDD)

AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE.

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.)

DD-214

9. TYPE OF REVIEW REQUESTED (X one)

<input checked="" type="checkbox"/> 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.
<input type="checkbox"/> 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.
<input type="checkbox"/> 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.)

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.

<input type="checkbox"/> SPOUSE	<input type="checkbox"/> WIDOW	<input type="checkbox"/> WIDOWER	<input type="checkbox"/> NEXT OF KIN	<input type="checkbox"/> LEGAL REPRESENTATIVE	<input type="checkbox"/> OTHER (Specify)
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12.a. CURRENT MAILING ADDRESS OF APPLICANT OR PERSON ABOVE

(Enclosed notification of any change in address.)

b. TELEPHONE NUMBER (Include Area Code)

c. E-MAIL

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.)

CASE NUMBER
(Do not write in this space.)

a. SIGNATURE - REQUIRED (Applicant or person in item 11 above)

b. DATE SIGNED - REQUIRED (YYYYMMDD)

20110217

F02007-00687

14. CONTINUATION OF ITEM 6, ISSUES (If applicable)

I AM GIVING MY SINCERE APOLOGY FOR MY BEHAVIOR AND CONDUCT WHILE I WAS A MEMBER OF THE UNITED STATES AIR FORCE. NOW I ASK FOR YOUR HELP SO I CAN GET STARTED ON MY LIFE AFTER THE SERVICE AND IMPROVE MY STATUS IN THE COMMUNITY AND PROVIDE FOR MY FAMILY AND GIVE THEM THE PROPER LIFE THAT THEY DESERVE. IF WE LOOK AT SOCIETY TODAY YOU REALLY DON'T STAND A CHANCE AT A GREAT CAREER WITHOUT A DEGREE BEING ACHIEVED. THANKS FOR CONSIDERING MY REQUEST.

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

**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.)

*Form Approved
OMB No. 0704-0004
Expires Aug 31, 2006*

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

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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 <i>(X one)</i>	ARMY	MARINE CORPS	NAVY	<input checked="" type="checkbox"/> AIR FORCE	COAST GUARD
b. NAME <i>(Last, First, Middle Initial)</i>	c. GRADE/RANK AT DISCHARGE		d. SOCIAL SECURITY NUMBER		
20081017		E-4			
2. DATE OF DISCHARGE OR SEPARATION <i>(YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149)</i>	4. DISCHARGE CHARACTERIZATION RECEIVED <i>(X one)</i>		5. BOARD ACTION REQUESTED <i>(X one)</i>		
20081017	<input checked="" type="checkbox"/> HONORABLE		<input checked="" type="checkbox"/> CHANGE TO HONORABLE		
	<input checked="" type="checkbox"/> GENERAL/UNDER HONORABLE CONDITIONS		<input type="checkbox"/> CHANGE TO GENERAL/UNDER HONORABLE CONDITIONS		
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	<input type="checkbox"/> BAD CONDUCT <i>(Special court-martial only)</i>		<input checked="" type="checkbox"/> CHANGE NARRATIVE REASON FOR SEPARATION TO: RE Code 37		
3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION	<input type="checkbox"/> UNCHARACTERIZED				
23 ACC, Moody AFB, GA	<input type="checkbox"/> OTHER <i>(Explain)</i>				

6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST *(Continue in Item 14. See instructions on Page 3.)*

To help finish out school and able to reenlist into the armed forces,

7. *(X if applicable)* AN APPLICATION WAS PREVIOUSLY SUBMITTED ON *(YYYYMMDD)*

AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE.

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.)*

DD Form 214

9. TYPE OF REVIEW REQUESTED *(X one)*

<input checked="" type="checkbox"/> CONDUCT A RECORD REVIEW OF MY DISCHARGE BASED ON MY MILITARY PERSONNEL FILE AND ANY ADDITIONAL DOCUMENTATION SUBMITTED BY ME. I AND/OR <i>(counsel/representative)</i> WILL NOT APPEAR BEFORE THE BOARD.
<input type="checkbox"/> I AND/OR <i>(counsel/representative)</i> WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE THE BOARD IN THE WASHINGTON, D.C. METROPOLITAN AREA.
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10. a. COUNSEL/REPRESENTATIVE <i>(If any)</i> NAME <i>(Last, First, Middle Initial)</i> AND ADDRESS <i>(See Item 10 of the instructions about counsel/representative.)</i>	b. TELEPHONE NUMBER <i>(Include Area Code)</i>
	c. E-MAIL
	d. FAX NUMBER <i>(Include Area Code)</i>

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☐ 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 <i>(Include Area Code)</i>
c. E-MAIL
d. <i>N/A</i>

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. SIGNATURE - REQUIRED <i>(Applicant or person in Item 11 above)</i>	b. DATE SIGNED - REQUIRED <i>(YYYYMMDD)</i>	CASE NUMBER <i>(Do not write in this space.)</i> FD-2009-687
	20091025	

14. CONTINUATION OF ITEM 6, ISSUES (If applicable)

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

16. REMARKS (If applicable)

MAIL COMPLETED APPLICATIONS TO APPROPRIATE ADDRESS BELOW.

ARMY

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St. Louis, MO 63132-5200
(See <http://arba.army.pentagon.mil>)

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COAST GUARD

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

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

AFDRB BRIEF							
NAME (Last, First, MI):			SSN:		DOCKET # FD-2009-00687		COMPONENT: USAF
TYPE OF DISCHARGE: GENERAL		DISCHARGE FROM: MOODY AFB, GA		DISCHARGE DATE: 17 OCT 08		APPEALS FOR: UPGRADE DISCHARGE TO HONORABLE, & RE CODE.	
DOB/ ENLMT AGE: 05 MAR 83 18		DISCH AGE: 25		FORMER: SRA	HGH: SRA	B. CURRENT DOR: 16 JAN 07	C. TIME LOST: NONE
AFSC: 2W151- AIRCRAFT ARMAMENT SYS JOURNEYMAN				DEP DT: 28 DEC 00		ASVAB SCORES:	
D. ART 15 / VAC: ART 15: 1		D. LOR, LOA, RIC, LOC: LOR: 2		E. SCM / SPCM / GCM: NONE		ADDITIONAL: (IE. CIVIL CONV, CDC)	
F. RECORD OF SERVICE (EPR/ OPR, PAST TO PRESENT) : 13 SEP 01 - 15 APR 03 ELLSWORTH AFB 4 (DBH) 16 APR 03 - 15 APR 04 ELLSWORTH AFB 4 (ANNUAL) 16 APR 04 - 22 MAY 05 ELLSWORTH AFB 2 (ANNUAL) REFERRAL 23 DEC 05 - 02 DEC 05 ELLSWORTH AFB 3 (CRO) 03 DEC 05 - 02 DEC 06 OSAN AB 5 (ANNUAL) 03 DEC 06 - 02 DEC 07 POPE AFB 5 (ANNUAL)							
G. AWARDS & DECS: AFAM, AFOUaw/VDEC w/1OLC , AFGCM, NDSM, GWOTEM, GWOTSM, KDSM, AFOSSTR, AFESR, AFLSR, USAFPMGR, AFTR							
EAD: 13 SEP 01		DAS: 07 JAN 08		H. TMS: 7 YRS 9 MOS 20 DAS		TAMS: 7 YRS 1 MOS 5 DAS	
APPLN (DD FORM 293) DTD: 25 OCT 09		DT/ INITIALS: 09MAR11/CM		NPA/PA: NPA		BOARD REGION:	
RECORDS :	MPR:NO	ARMS: YES	STR: NO	ISSUES: YES	ATTACHMENTS: YES		
AUTH FOR DISCHARGE : AFI 36-3208, PARA 5.50.1 (A PATTERN OF MISCONDUCT: DISCREDITABLE INVOLVEMENT WITH MILITARY OR CIVIL AUTHORITIES.							
ART 15; VAC; SCM; SPMC; GCM; ADDITIONAL: ART 15: 16 MAY 05 - (ART 92) MISUSED GTC. LOR: 17 MAR 08 - DISORDERLY CONDUCT. LOR: 30 APR 08 - OPERATED A MOTOR VEHICLE WHILE ABILITY WAS IMPAIRED BY ALCOHOL & FAILED TO CARRY DRIVERS LICENSE.							
EXAMINER'S NOTE: NOTIFICATION MEMO, DATED 20 AUG 08, PARA 2B CITES ADDITIONAL MISCONDUCT AS: MFR: 05 MAY 08 - FAILED TO COMPLETE ADAPT PROGRAM.							
NOTES:							

APPLICATION FOR THE REVIEW OF DISCHARGE OR DISMISSAL FROM THE ARMED FORCES OF THE UNITED STATES

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E-4/A1C

d. SOCIAL SECURITY NUMBER

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20081014

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☐ UNDER OTHER THAN HONORABLE CONDITIONS
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25TH/MOODY AFB

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☐ 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.)

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)

c. E-MAIL

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. SIGNATURE - REQUIRED (Applicant or person in Item 11 above)

b. DATE SIGNED - REQUIRED (YYYYMMDD)

20110217

CASE NUMBER

(Do not write in this space.)

F02007-60687

14. CONTINUATION OF ITEM 6, ISSUES (If applicable)

I AM GIVING MY SINCERE APOLOGY FOR MY BEHAVIOR AND CONDUCT WHILE I WAS A MEMBER OF THE UNITED STATES AIR FORCE. NOW I ASK FOR YOUR HELP SO I CAN GET STARTED ON MY LIFE AFTER THE SERVICE AND IMPROVE MY STATUS IN THE COMMUNITY AND PROVIDE FOR MY FAMILY AND GIVE THEM THE PROPER LIFE THAT THEY DESERVE. IF WE LOOK AT SOCIETY TODAY YOU REALLY DON'T STAND A CHANCE AT A GREAT CAREER WITHOUT A DEGREE BEING ACHIEVED. THANKS FOR CONSIDERING MY REQUEST.

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

**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.)

*Form Approved
OMB No. 0704-0004
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 Services and Communications 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 <i>(X one)</i>	<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> NAVY	<input checked="" type="checkbox"/> AIR FORCE	<input type="checkbox"/> COAST GUARD
b. NAME <i>(Last, First, Middle Initial)</i>	c. GRADE/RANK AT DISCHARGE		d. SOCIAL SECURITY NUMBER		

E-4

2. DATE OF DISCHARGE OR SEPARATION *(YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149)*

20081017

4. DISCHARGE CHARACTERIZATION RECEIVED *(X one)*

☒ HONORABLE
☒ GENERAL/UNDER HONORABLE CONDITIONS
☐ UNDER OTHER THAN HONORABLE CONDITIONS
☐ BAD CONDUCT *(Special court-martial only)*
☐ UNCHARACTERIZED
☐ OTHER *(Explain)*

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:
RE Code 37

3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION

23 ACC, Moody AFB, GA

6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST *(Continue in Item 14. See instructions on Page 3.)*

To help finish out school and able to reenlist into the armed forces,

7. (X if applicable) AN APPLICATION WAS PREVIOUSLY SUBMITTED ON *(YYYYMMDD)*

N/A

AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE.

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.)*

DD Form 214

9. TYPE OF REVIEW REQUESTED *(X one)*

- ☒ 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.)

b. TELEPHONE NUMBER *(Include Area Code)*

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☐ SPOUSE ☐ WIDOW ☐ WIDOWER ☐ NEXT OF KIN ☐ LEGAL REPRESENTATIVE ☐ OTHER *(Specify)* _____

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(Forward notification of any change in address.)

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d. FAX NUMBER *(Include Area Code)*

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CASE NUMBER
(Do not write in this space.)

a. SIGNATURE - REQUIRED *(Applicant or person in Item 11 above)*

b. DATE SIGNED - REQUIRED
(YYYYMMDD)

20091025

FD-2009-687

14. CONTINUATION OF ITEM 6, ISSUES (If applicable)

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

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 63132-6200
(See <http://arba.army.pentagon.mil>)

NAVY AND MARINE CORPS

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720 Kennon Street, S.E.
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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
23RD AIRCRAFT MAINTENANCE SQUADRON (ACC)
MOODY AIR FORCE BASE GEORGIA

Date: 20 Aug 08

MEMORANDUM FOR SENIOR AIRMAN

FROM: 23 AMXS/CC

SUBJECT: Notification Memorandum – Board Hearing

1. I am recommending your discharge from the United States Air Force for Misconduct: A Pattern of Misconduct, Discreditable Involvement with Military or Civil Authorities and Failure in Alcohol Abuse Treatment due to unwillingness/inability. The primary reason for this discharge is Misconduct: A Pattern of Misconduct, Discreditable Involvement with Military or Civil Authorities. The authority for this action is AFD 36-32, *Military Retirements and Separations*, and AFI 36-3208, *Administrative Separation of Airmen*, paragraphs 5.50.1 and 5.32. Copies of the documents to be forwarded to the separation authority to support this recommendation are attached.

2. My reasons for this action are:

a. You have engaged in a pattern of misconduct, as evidenced by the following:

(1) On or about 20 Apr 08, you were found to be operating a motor vehicle while your ability was impaired by alcohol. Additionally, you were not carrying your driver's license as required by the state of Georgia. For these offenses, you received a Letter of Reprimand (LOR), dated 30 Apr 08.

(2) On or about 22 Feb 08, you urinated in public on the lawn of a Valdosta resident and then lied to a Valdosta Police Department Officer. Additionally, on or about 16 Feb 08, you were arrested by the Valdosta Police Department for disorderly conduct. For these offenses, you received an LOR, dated 17 Mar 08.

(3) From about 13 Feb 05 to about 28 Feb 05, while stationed at Ellsworth AFB, SD, you willfully failed to refrain from making unauthorized purchases on your government travel card. For this offense, you received nonjudicial punishment under Article 15, UCMJ, as evidenced by AF 3070A, dated 16 May 05.

b. You have failed to complete alcohol abuse treatment as evidenced by the following:

On or about 21 Apr 08, you were involved in an alcohol related incident. Upon evaluation it was clear that you made a conscious decision to violate the ADAPT abstinence policy and that you are not prepared to make the changes necessary to successfully complete your treatment program. As a result, you failed to complete the ADAPT program, as evidenced by a memorandum written by Maj John Bowers, ADAPT Program Manager, dated 5 May 08.

3. This action could result in your separation with an Under Other Than Honorable Conditions (UOTHC) Discharge. I am recommending that you receive an Under Honorable Conditions (General) Discharge. The commander exercising special court-martial jurisdiction or a higher authority will make the final decision in this matter. If you are discharged, you will be ineligible for reenlistment in the United States Air Force and will probably be denied enlistment in any component of the armed forces and any special pay, bonus, or education assistance funds may be subjected to recoupment.

4. You have the right to:

a. Consult legal counsel.

b. Present your case to an administrative discharge board.

c. Be represented by legal counsel at a board hearing.

d. Submit statements on your behalf in addition to, or in lieu of, the board hearing.

e. Waive the above rights. You must consult legal counsel before making a decision to waive any of your rights.

5. You must report to Public Health, Building 899 with an escort, ^{SS} MS67, to pick up a DD Form 2697, Report of Medical Assessment. You must then call your Primary Care Manager (PCM) to get a same day or next day appointment. When you make the appointment you must tell your PCM that it is for a pending involuntary separation. Please return a copy along with the package to the Legal Office.

6. 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 Military Defense Counsel, on 20 AUG 08, at ^{SS} 1230 hours. Instead of the appointed counsel, you may have another Military Counsel, if the lawyer you request is in the active military service and is reasonably available as determined according to AFI 51-201, *Administration of Military Justice*. In addition to military counsel, you have the right to employ civilian counsel at your own expense. The Air Force does not pay expenses incident to the employment of civilian counsel. Civilian counsel, if employed, must be readily available.

7. Confer with your counsel and reply, in writing, within **7 duty days**, specifying the rights you choose to exercise. The statement must be signed in the presence of your counsel who also will sign it. If you waive your right to a hearing before an administrative discharge board, you may submit written statements on your behalf. I will send the statements to the discharge authority with the case file to be considered with this recommendation. If you fail to respond, your failure will constitute a waiver of the right to the board hearing.

8. Any personal information you furnish in rebuttal is covered by the Privacy Act of 1974. A

copy of AFI 36-3208 is available for your use at 23 WG/JA.

9. If you request a board and you fail to appear without good cause, your failure to appear constitutes a waiver of your right to be present at the hearing.
10. If you received advanced educational assistance, special pay, or bonuses, and have not completed the period of active duty you agreed to serve, you may be subject to recoupment.
11. Execute the attached acknowledgment and return it to me immediately.

Commander

JSAF

Attachments:

1. LOR, dated 30 Apr 08 (2 pages)
2. LOR, dated 17 Mar 08 (3 pages)
3. AF Form 3070A, dated 16 May 05 (3 pages)
4. Memorandum from Maj Bowers, dated 5 May 08 (1 page)
5. EPRs (16 pages)



DEPARTMENT OF THE AIR FORCE
HEADQUARTERS 23RD WING (ACC)
MOODY AIR FORCE BASE GEORGIA

5 Sep 08

MEMORANDUM FOR 23 WG/CC *How*

FROM: 23 WG/JA

SUBJECT: Legal Review of AFPD 36-32 and AFI 36-3208 Discharge Action:
SrA

1. I have reviewed the subject discharge action and find it legally sufficient. Lt Col 23 AMXS/CC, has recommended that SrA be involuntarily separated from the United States Air Force with an Under Honorable Conditions (General) discharge in accordance with AFPD 36-32, *Military Retirements and Separations* (14 Jul 93), and AFI 36-3208, *Administrative Separation of Airmen* (9 Jul 04), paragraph 5.50.1, Misconduct: A Pattern of Misconduct, Discreditable Involvement with Military or Civil Authorities and paragraph 5.32, Failure in Alcohol Abuse Treatment due to unwillingness/inability. Under AFI 36-3208, paragraph, 6.46, the primary reason for this discharge is Misconduct: A Pattern of Misconduct, Discreditable Involvement with Military or Civil Authorities. Lt Col does not recommend probation and rehabilitation (P&R). I concur.

2. In reviewing this action, I find that there is a legally sufficient basis to separate SrA from the United States Air Force with an Under Honorable Conditions (General) discharge without P&R.

a. **Basis for discharge:** AFI 36-3208, paragraph 5.50 states that Airmen are subject to discharge for a pattern of misconduct in the current enlistment consisting wholly or in part of misconduct more serious than that considered under paragraph 5.49. Paragraph 5.32 states that Airmen are subject to discharge if they are in a program of treatment for alcohol abuse and fail to successfully complete the program due to inability or unwillingness to cooperate. Pursuant to paragraph 5.2.1, Airmen must be counseled formally concerning their deficiencies (through counselings, reprimands, nonjudicial punishments, etc.) and given the opportunity to overcome them before a commander recommends discharge. SrA received nonjudicial punishment under Article 15, UCMJ, on 16 May 05, for government travel card (GTC) misuse. Additionally, SrA received other rehabilitative opportunities for his disciplinary deficiencies, including 2 LORs: one for disorderly conduct and one for driving under the influence of alcohol. On 17 Apr 08, SrA was enrolled in Level I outpatient treatment for alcohol abuse. On 21 Apr 08, SrA was involved in an alcohol related incident and he was considered a treatment failure. The 23 AMXS/CC afforded SrA the opportunity for rehabilitation and he has failed to correct his behavior. Thus, there is a legally sufficient basis for discharge.

b. **Should SrA be discharged:** In determining whether SrA should be discharged, you may consider his entire military record, the nature of his offenses and the circumstances surrounding them. You must then decide whether his conduct was prejudicial to good order and discipline. SrA has been in the Air Force for over six years, yet he has failed to correct his behavior. It is clear through his misconduct, and subsequent failure to

Global Power for America

rehabilitate, that SrA cannot conform to military standards. Thus, discharge is warranted.

c. **Service characterization:** As processed, SrA discharge can be characterized as honorable or general.

(1) Honorable: *Not Recommended.* AFI 36-3208, paragraph 1.18.1, states that an Honorable discharge should be given when the airman's service has met Air Force standards of acceptable conduct and the member's service is so meritorious that any other characterization would be inappropriate. As noted above, SrA conduct and performance has not met Air Force standards. An Honorable discharge is not appropriate.

(2) General: *Recommended.* AFI 36-3208, paragraph 1.18.2, states that a general discharge should be given when the airman's service has been honest and faithful, but negative aspects of the airman's conduct or performance of duty outweigh positive aspects of the airman's military record. In this case, SrA has numerous instances of misconduct. His misconduct, taken as a whole, outweighs the positive aspects of his military service. Thus, a general discharge is appropriate.

(3) UOTHHC: *Not Recommended.* AFI 36-3208, paragraph 1.18.3, states that an Under Other Than Honorable Conditions discharge should be given when the airman's pattern of behavior or one or more acts or omissions constitute a significant departure from the conduct expected of airman. While SrA misconduct was severe, his misconduct was not so severe that an Under Other Than Honorable Conditions discharge is appropriate.

d. **Probation and rehabilitation:** AFI 36-3208, paragraph 7.3, states that P&R may be offered to airmen who have demonstrated a potential to serve satisfactorily, have the capacity to be rehabilitated for continued military service or completion of the current enlistment, or whose retention on active duty in a probationary status is consistent with the maintenance of good order and discipline in the Air Force. SrA has demonstrated an inability to serve satisfactorily and has failed to respond to opportunities to correct his behavior. It is unlikely that future rehabilitative efforts and opportunities will be effective, thus he should not be offered P&R.

3. **Member's response:** SrA has more than six years of total active military service, therefore, he is board eligible. On 21 Aug 08, after consulting with defense counsel and after being fully advised of his rights, SrA submitted a waiver of his right to an administrative discharge board on the condition that he receive no less than a general discharge.

4. **Options for separation authority:** As the Special Court-Martial Convening Authority, you have the following options:

a. Recommend to the General Court-Martial Convening Authority (9 AF/CC) that SrA be retained if you feel that discharge is not warranted;

b. Recommend to 9 AF/CC that SrA be separated with an honorable discharge with or without the opportunity for P&R;

c. Recommend that 9 AF/CC accept the waiver and approve an Under Honorable Conditions (General) discharge with or without the opportunity for P&R;

d. Reject the conditional waiver and request an unconditional waiver for a board hearing be submitted by SrA or

e. Direct that the 23 AMXS/CC reinitiate this action for processing IAW with board hearing procedures if you believe that an Under Other Than Honorable Conditions discharge may be warranted.

5. **Recommendation:** I recommend that you accept SrA waiver and recommend that he be separated with an Under Honorable Conditions (General) discharge without P&R.

Maj, USAF

Staff Judge Advocate

Attachments:

1. 23 AMXS/CC's Recommendation Memorandum
2. Member's Acknowledgement of Rights and Conditional Waiver of Rights
3. Copy of Notification Memorandum w/ atchs