

SUMMARY: The Applicant was discharged on July 17, 2024 in accordance with Department of the Air Force Instruction 36-3211, *Military Separations*, with an Uncharacterized / Entry Level Separation Service Characterization for Erroneous Entry. The Applicant requested an upgrade of their Service Characterization and a change to the Reentry Code.

The Applicant requested the Board be completed based on a Record Review. The Board was conducted on August 28, 2025. The Applicant was not represented by counsel.

The attached examiner's brief (provided to Applicant only), extracted from available service records, contains pertinent data regarding the circumstances and character of the Applicant's military service.

DISCUSSION: The Discharge Review Board (DRB), under its responsibility to examine the propriety and equity of an Applicant's discharge, is authorized to change the Characterization of Service and the Narrative Reason for discharge if such changes are warranted. If applicable, the Board can also change the Applicant's Reentry Code. In reviewing discharges, the Board presumes regularity in the conduct of governmental affairs unless there is substantial credible evidence to rebut the presumption, including evidence submitted by the Applicant. The Board thoroughly reviewed the circumstances that led to the discharge and the discharge process to determine if the discharge met the pertinent standards of equity and propriety.

The DRB provided a notice to inform the service member of resources available to help answer their questions about the application process and/or to help them supplement their application, to include information on the types of evidence that can be submitted to support a claim; information regarding potential eligibility for mental health treatment and evaluation services offered by the Department of Veterans Affairs (VA); general information regarding Veterans Service Organizations that may assist with DRB applications, and their right to retain counsel; a link to a database of legal services organizations that serve members of the military, veterans, and their families; the weblink to the VA's Directory of Veteran's Service Organizations; and information regarding reasonable accommodation requests from the DRB in the application and adjudication process.

The Applicant's record of service did not include any documented misconduct leading up to their discharge.

The documentary evidence the Board considered as part of the review includes, but is not limited to the DD Form 293, *Application for the Review of Discharge from the Armed Forces of the United States*, and any additional documentation submitted by Applicant and/or counsel; the Applicant's personnel file from the Automated Records Management System (ARMS); and the DRB Brief detailing the Applicant's service information and a summary of the case.

The Applicant stated prior to joining the military they broke up with their significant other which sent them into a brief bout of mild depression. They stated they were diagnosed with mixed obsessional thought disorder (OCD) and ADHD to which they were prescribed medication. During BMT the Applicant stated they were told by a psychologist they did not need the medication and recommended a waiver for it. The Applicant stopped taking the medication, however, they were put on a medical hold to determine if they would be separated due to the medication. They contended their chain of command made discretionary, factual, and procedural errors for separating them so early in their enlistment.

The DRB determined the Applicant's discharge was proper and equitable. A thorough review of the Applicant's case revealed they were discharged due to erroneous entry due to failing to disclose their mental health treatment and drug use history during MEPS. The Applicant admitted to having sessions with a therapist

and taking psychotropic medications. The Board determined the Applicant did not provide any substantial documentation in support of their upgrade and therefore denied the Applicant's request for an upgrade.

LIBERAL CONSIDERATION: Due to the Applicant's contentions or evidence of a mental health diagnosis and/or experiences of sexual assault or sexual harassment and/or records documenting that one or more symptoms of mental health conditions and/or experiences of sexual assault or sexual harassment existed/occurred during military service found in the Applicant's record, the Board considered the case based on the liberal consideration (LC) standards required by guidance from the Office of the Under Secretary of Defense for Personnel and Readiness and 10 USC §1553. The Board included a member who is a physician, clinical psychologist, psychiatrist or social worker with training on mental health issues connected with post-traumatic stress disorder (PTSD) or traumatic brain injury (TBI) or other trauma. Specifically, the Board reviewed the four questions the Under Secretary of Defense provided that Boards should consider when weighing evidence in requests for modification of discharges due in whole or in part to mental health conditions, including PTSD: TBI, sexual assault, and sexual harassment. The Board considered the following:

1. Did the veteran have a condition or experience that may excuse or mitigate the discharge?

The Applicant's legal counsel on behalf of the Applicant contended that in April 2023, the Applicant broke up with their significant other, which sent them into a brief bout of mild depression. They received help from a psychologist who wanted them to receive a formal diagnosis of Mixed Obsessional Thoughts Disorder or Obsessive-Compulsive Disorder (OCD) and Attention-Deficit Hyperactivity Disorder (ADHD). They complied with this recommendation and was diagnosed by a specialist who gave them a prescription (name of prescription not identified in the legal brief) for these conditions. They took their medication to Basic Military Training (BMT) because they trusted the medical advice they received and had fully disclosed the purpose of the use of medication to their cadre. They were sent to see a psychologist at their base for a check-in, and this provider said the Applicant did not need the medication and recommended that they receive a waiver. The Applicant took this advice and stopped taking their medication. They remained on medical for 96 days and was sent home after 156 days in BMT. They were separated from the Air Force with a narrative of "erroneous entry" and given a reentry code of "RD-2C." The Applicant attended BMT without any major medical or disciplinary issues. Their legal counsel also contended the Applicant had emotions that were typical after a breakup and that they never really needed to go to therapy to handle their emotions, and they were assured that the medication would not impact them negatively. If they received the medical waiver as recommended by the Air Force's medical staff, they would not be separated.

2. Did that condition exist/experience occur during military service?

A review of the Applicant's military and service treatment records found that the Applicant did not report having any mental health condition or concerns during their enlistment process or Military Entrance Processing Station (MEPS). Their records indicated that during BMT, they met with a clinical psychologist by referral of their medical provider in February 2024 for possession of a psychiatric medication for which they did disclose during MEPS. They required a medical waiver to be retained in the service. The June 2024 Legal Review of the Trainee Medical Waiver Request, for having a condition that disqualifies enlistment, recommended an entry level separation on the basis of erroneous enlistment. A condition, not diagnosis, of personal history of other mental and behavioral disorders was annotated in the record. A Mental Health Evaluation Summary report dated in June 2024 completed by the clinical psychologist reported that the Applicant reported a prior-service history of behavioral health counseling initiated in the summer of 2022 and punctuated by medication use spanning from May 2023 to the present. They also disclosed two instances of prior service illicit drug use that were not reported during MEPS. Their prior service treatment records were attached to the report. A May 2024 letter from their prior service psychiatry prescriber from a civilian provider reported the Applicant had been under this provider's care since April 2023 and had been diagnosed with Mixed Obsessional Thoughts and Acts, and they had a pre-existing diagnosis of ADHD, which was managed by psychotropic medications. They were prescribed Luvox by this prescriber, which resulted in psychiatric stability. They had exhibited no symptoms indicative of depression, mania, psychosis, or anxiety

since the initiation of this medication regime. Additionally records from this provider for treatment services between May 2023 and February 2024 reported they were prescribed trials of Ritalin, Concerta (prescribed five years prior), and Prozac, and they were given rule out diagnoses of OCD and Psychosis (Possible hallucinations). A “rule out” for a diagnosis means that there is a possibility of this condition because some symptoms are present but not enough to formally diagnose the condition or confirm this diagnosis. A letter from their prior service psychotherapy provider at a civilian provider reported they had been engaging in mental health counseling from April 2023 to February 2024, they had made significant progress with no reports or signs of psychosis or mental impairment. The Applicant’s mental health condition of Mixed Obsessional Thoughts Disorder or OCD and ADHD had clearly existed prior to service (EPTS). These conditions were not developed during their military service or were caused by their military service.

3. Does that condition, or experience actually excuse or mitigate the discharge?

A review of the Applicant’s records revealed the Applicant was discharged with an Uncharacterized Entry Level Separation (ELS), with 0 years and 5 months time in service. The Applicant was discharged from service for erroneous entry, specifically, they failed to disclose their significant prior service mental health condition and treatment history during MEPS. It is acknowledged that the Applicant completed their MEPS paperwork before they started to receive mental health treatment, so technically, they did not fail to disclose their condition and treatment. They did, however, fail to disclose their prior service illicit drug use during MEPS. However, the Applicant had the responsibility to disclose their condition and treatment, which occurred over several months before they reported to BMT. Had the Applicant disclosed this significant history and treatment before BMT, they would have had to repeat the enlistment/MEPS process for their newly acquired condition and treatment, would have been rendered disqualified for service, and would have required a waiver for entry into the Air Force. Their EPTS mental health condition did not meet retention standards, and they were discharged appropriately under ELS for serving less than 365 days according to DAFI 36-3211. There was no impropriety or inequity identified with their discharge from a mental health perspective, and while their EPTS mental health condition was the cause of their discharge from service for erroneous entry, their mental health condition did not excuse or mitigate the discharge.

4. Does that condition, or experience outweigh the discharge?

Since the Applicant’s EPTS mental health condition did not excuse or mitigate the discharge, their EPTS mental health condition also did not outweigh the discharge. The Applicant was requesting a change to their reentry (RE) code to allow them to re-enlist. They were discharged under ELS and was furnished with an RE code of 2C. This RE code was consistent with the regulation, DAFI 36-3211, that they were discharged under for the reason of erroneous entry. There was no impropriety or inequity identified with their discharge from a mental health perspective.

Additionally, the Board considered the factors laid out in the attachment to the Under Secretary of Defense memorandum, *Guidance to Military Discharge Review Boards and Boards for Correction of Military/Naval Records Regarding Equity, Injustice, or Clemency Determinations*, dated 25 June 2018, known as the “Wilkie Memo.” The Board considered the factors listed in paragraphs (6)(a)-(6)(l) and (7)(a)-(7)(r) of this memorandum and found no evidence of inequity or impropriety.

FINDING AND CONCLUSION: After a thorough review of the available evidence, to include the Applicant’s issues, summary of service, service/medical record entries, and discharge process, the Board found the discharge was proper and equitable. The DRB voted unanimously to **deny** the Applicant’s request. Therefore, the awarded Service Characterization shall remain “Uncharacterized / Entry Level Separation,” the Narrative Reason for separation shall remain Erroneous Entry, and the Reentry Code shall remain 2C. The DRB results were approved by the Presiding Officer on September 8, 2025.

Should the Applicant wish to appeal this decision, they must request a personal appearance before this Board before applying for relief to the Air Force Board for Correction of Military Records (AFBCMR). In accordance

with DAFI 36-2603, *Air Force Board for Correction of Military Records*, all Applicants before the AFBCMR must first exhaust available administrative avenues of relief before applying to the AFBCMR otherwise their AFBCMR case will be administratively closed until such time that the Applicant avails themselves of the available avenue of relief. Therefore, should the Applicant wish to appeal this decision, they must first exercise their right to make a personal appearance before the AFDRB.

Instructions on how to appeal an AFDRB decision can be found at <https://afrbaportal.azurewebsites.us>

If desired, the Applicant can request a list of the Board members and their votes by writing to:

Air Force Review Boards Agency
Attn: Discharge Review Board
3351 Celmers Lane
Joint Base Andrews, MD 20762-6435

Attachment:
Examiner's Brief (Applicant Only)