

**1. Applicant's Name:** [REDACTED]**a. Application Date:** 19 May 2021**b. Date Received:** 19 May 2021**c. Counsel:** None**2. REQUEST, ISSUES, BOARD TYPE, AND DECISION:**

**a. Applicant's Requests and Issues:** The current characterization of service for the period under review is General (Under Honorable Conditions). The applicant requests an upgrade to Honorable.

**b.** The applicant seeks relief contending, they developed a substance abuse habit of drugs and alcohol, while in the service, which was introduced to them through their leadership and fellow junior enlisted Soldiers. They were given individual and group therapy but failed to stay sober outside of therapy. The applicant does not blame the Army and took full responsibility for their actions; however, if they were given the opportunity to go to a residential treatment facility, the applicant would have been able to complete their term. Since their discharge, they have been successfully treated and has remained sober for over 3.5 years and counting. They have included letters from a few of the many people who are close to them today. Moreover, since their sobriety, they have worked closely with the recovery community, including helping other veterans suffering from mental illness and substance abuse. A drug addiction destroyed their life and their ability to fulfill the commitment to their country. Therefore, they are requesting an Honorable discharge.

**a. Board Type and Decision:** In a records review conducted on 7 March 2025, and by a 5-0 vote, the Board determined that the characterization of service was inequitable based on the applicant's length of service as an in-service mitigating factor. Accordingly, the Board voted to grant relief in the form of an upgrade to the characterization of service to Honorable. The Board determined the narrative reason/SPD code and RE code were proper and equitable and voted not to change them.

*Please see Section 9 of this document for more detail regarding the Board's decision.*

**2. DISCHARGE DETAILS:**

**a. Reason / Authority / Codes / Characterization:** Drug Rehabilitation Failure / AR 635-200, Chapter 9 / JPC / RE-4 / General (Under Honorable Conditions)

**b. Date of Discharge:** 12 February 2015

**c. Separation Facts:**

**(1) Date of Notification of Intent to Separate:** Undated

**(2) Basis for Separation:** The applicant failed to complete the Army Substance Abuse Program (ASAP); additionally, they failed to report on divers occasions, left their place of duty, and lost their government-issued meal card.

**(3) Recommended Characterization:** General (Under Honorable Conditions)

**(4) Legal Consultation Date:** 26 November 2014

**(5) Administrative Separation Board:** NA

**(6) Separation Decision Date / Characterization:** 28 January 2015 / General (Under Honorable Conditions)

**3. SERVICE DETAILS:**

**a. Date / Period of Enlistment:** 22 July 2013 / 4 years, 19 weeks

**b. Age at Enlistment / Education / GT Score:** 17 / High School Diploma / 119

**c. Highest Grade Achieved / MOS / Total Service:** E-3 (PFC) / 11B1P Infantryman / 1 year, 6 months, 21 days

**d. Prior Service / Characterizations:** None

**e. Overseas Service / Combat Service:** None

**f. Awards and Decorations:** NDSM, ASR, PB

**g. Performance Ratings:** NA

**h. Disciplinary Action(s) / Evidentiary Record:**

**(1)** On 22 July 2013, the applicant enlisted at the age of 17, with parental consent, for 4 years and 19 weeks as a private first class, PFC (E-3). On 18 July 2014, the applicant's rehabilitation team (ASAP Counselor and Clinical Supervisor) summarized their rehabilitation efforts, which indicated the applicant was referred to ASAP on 6 June 2014, following an arrest. They were enrolled in treatment on 13 June and agreed to comply with all treatment requirements. The applicant completed three individual counseling sessions, two group sessions, and the 14-hour Prime for Life course. On 10 July, the applicant informed ASAP of their illegal marijuana use since their last group session (3 July). The ASAP Counselor notified their company commander (CPT) of the admission on 14 July and a patient progress report (PPR) was then scheduled for 18 July. Due to the violation of ASAP policy, their rehabilitation prognosis was poor and they were determined to be an ASAP Rehabilitation Failure.

**(2)** Also on 18 July 2014, according to the commander's report, the applicant received nonjudicial punishment (NJP) in violation of Article 134, UCMJ (facts and circumstances unknown) and as a result was reduced to private second class, PV2 (E-2); forfeiture of \$400.00 pay per month for one month, suspended, to be automatically remitted if not vacated by 11 August 2014; and extra duty for 14 days.

**(3)** On 3 and 29 September 2014, the applicant completed their separation exams at Bassett Army Community Hospital (BACH), Joint Base Elmendorf-Richardson, AK, which indicated a clean bill of health with no diagnoses. The provider qualified them for separation and did not have any recommendations. The mental status evaluation at Mental (Behavioral) Health which provided no diagnoses or recommendations. The provider indicated the applicant failed ASAP and psychiatrically cleared them to participate in administrative separation proceedings (Chapter 14).

**(4)** The applicant was counseled on three separate occasions for having failed to report (22 July, 20 October, and 12 November 2014) and on 16 October 2014, for having lost their

government-issued meal card.

(5) Although undated, the company commander notified the applicant of their intent to initiate separation proceedings under the provisions of AR 635-200, Chapter 9, Drug Rehabilitation Failure for the incompleteness of ASAP (Army Substance Abuse Program) and for failing to report on divers occasions, leaving their place of duty, and for losing their government-issued meal card. They recommended a General (Under Honorable Conditions) characterization of service. On 19 and 26 November 2014, the applicant acknowledged receipt of their separation notice, elected to consult with counsel and elected to submit a statement on their behalf. Defense counsel acknowledged their elections and counseled the applicant on the effects of their separation and the rights available to them.

(a) On 2 December 2014, a self-authored statement provides, the applicant requested an Honorable discharge because despite their substance abuse issues and rehabilitation failure, they have continued to Soldier on. In January 2014, they were stationed in Alaska where the applicant went to ITC (Individual Training Course) and JRTC (Joint Readiness Training Center) and had accomplished much during that time, becoming the platoon leaders RTO (Radio Telephone Operator) that early on in their career. In May 2014, they participated in a combatives tournament in the 140s weight class and placed second, which made everyone proud. While in JRTC, their friend from back home hung themselves and upon returning from the field, the applicant had a voicemail from the deceased friend. This loss affected them greatly and they suffered from depression and further sought therapy.

(b) On 2 June 2014, the applicant self-enrolled themselves in the Army Substance Abuse Program (ASAP), which is when their company turned on them and from then until now, their leadership harassed and belittled the applicant. The same day, their friend from basic training (A. T.) was killed overseas by friendly fire from an air strike. From then, their depression increased severely through the course of June and the applicant attempted suicide multiple times. They were required to sign the log every two hours, all day and night (since they were on suicide watch), which caused them to never sleep. In July, they begin having breakdowns and ended up self-medicating once with marijuana and talked about it to their counselor, resulting in them having notified the applicant's command, which initiated their discharge. Now at their company, the applicant was called a druggie, worthless, a mistake, a p\*\*\*y, and other terms. They have never even failed a drug test in their unit and have had three since that time. The applicant smoked so little that the urinalysis the following week, did not register a positive result. Since, the applicant has been screamed out of offices, harassed in their barracks room, threatened, along with NCOs (noncommissioned officers) attempting to convince them to go AWOL (absent without leave) instead of having waited for their discharge.

(c) They understand their mistake and realize they let many people down, including themselves; however, the applicant tried to hold their head high and separate Honorably and their company has bashed them the whole way. Because of this and their inability to continue therapy, they started coping poorly by being a bad Soldier. Their recovery has since made up for it and then some. Upon their discharge, the applicant planned to go back to their hometown and become a Boy Scout cadre again, begin college, and would eventually become an entrepreneur. The applicant is proud of their time in the Army, as they learned and did so much while in, and still motivate their peers to be good Soldiers. Even after serving, the applicant planned to serve their nation through public service, regardless, of the outcome on their discharge; they will work do their best in the civilian sector, to best benefit society.

(6) On 28 January 2015, the separation approval authority approved the discharge, with a General (Under Honorable Conditions) characterization of service and their separation orders were issued and later amended. A DD Form 214 (Certificate of Release or Discharge from

Active Duty) reflects the applicant was discharged accordingly on 12 February 2015, with 2 years, 4 months, and 6 days of total service. Their electronic signature was provided and they have not completed their first full term of service.

**i. Lost Time / Mode of Return:** None

**j. Behavioral Health Condition(s):** Posttraumatic Stress Disorder (PTSD), Unspecified; Opioid Use Disorder, Severe; Unspecified Opioid-Related Disorder

**(1) Applicant provided:** From 5 July – 12 August 2016, the applicant was enrolled in a detoxification and IOP (Intensive Outpatient Program) at Loma Linda University Behavioral Health Center, Redlands, CA and transitioned to residential treatment. They were prescribed Trazodone (Desyrel) and Remeron; diagnosed with Opiate Use Disorder, Severe; Adjustment Disorder; and General Anxiety Disorder.

**(a)** From 12 August – 24 September 2016, the applicant was enrolled in a residential program at Sunrise Recovery Ranch, Riverside, CA and was prescribed Trazodone and Remeron.

**(b)** From 26 September – 30 December 2016, the applicant was enrolled in a residency program and transitioned to an IOP at Serenity Lodge, Lake Arrowhead, CA, and received treatment for PTSD, Unspecified; Opioid Use Disorder, Severe; and Unspecified Opioid-Related Disorder.

**(2) AMHRR Listed:** None

**4. APPLICANT-PROVIDED EVIDENCE:** ACTS Online Application; Medical Records; Three Character Letters speak highly of the applicant and to their having accepted full responsibility for their choices, facing their addiction head on, helped others maintain their sobriety, and turned their life around, and today is an upstanding, Honorable, and responsible person.

**5. POST SERVICE ACCOMPLISHMENTS:** They have since went to treatment since their discharge and had over 3.5 years of sobriety. The applicant has done a lot of work since getting sober in the recover community, including helping other veterans suffering from mental illness and drug addiction.

**6. STATUTORY, REGULATORY AND POLICY REFERENCE(S):**

**a.** Section 1553, Title 10, United States Code (Review of Discharge or Dismissal) provides for the creation, composition, and scope of review conducted by a Discharge Review Board(s) within established governing standards. As amended by Sections 521 and 525 of the National Defense Authorization Act for Fiscal Year 2020, 10 USC 1553 provides specific guidance to the Military Boards for Correction of Military/Naval Records and Discharge Review Boards when considering discharge upgrade requests by Veterans claiming Post Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), sexual trauma, intimate partner violence (IPV), or spousal abuse, as a basis for discharge review. The amended guidance provides that Boards will include, as a voting board member, a physician trained in mental health disorders, a clinical psychologist, or a psychiatrist when the discharge upgrade claim asserts a mental health condition, including PTSD, TBI, sexual trauma, IPV, or spousal abuse, as a basis for the discharge. Further, the guidance provides that Military Boards for Correction of Military/Naval Records and Discharge Review Boards will develop and provide specialized training specific to sexual trauma, IPV, spousal abuse, as well as the various responses of individuals to trauma.

**b.** Multiple Department of Defense Policy Guidance Memoranda published between 2014 and 2018. The documents are commonly referred to by the signatory authorities' last names (2014 Secretary of Defense Guidance [Hagel memo], 2016 Acting Principal Deputy Under Secretary of Defense for Personnel and Readiness [Carson memo], 2017 Official Performing the Duties of the Under Secretary of Defense for Personnel and Readiness [Kurta memo], and 2018 Under Secretary of Defense for Personnel and Readiness [Wilkie memo].

**(1)** Individually and collectively, these documents provide further clarification to the Military Discharge Review Boards and Boards for Correction of Military/Naval Records when considering requests by Veterans for modification of their discharge due to mental health conditions, including PTSD; TBI; sexual assault; or sexual harassment. Liberal consideration will be given to Veterans petitioning for discharge relief when the application for relief is based in whole or in part on matters relating to mental health conditions, including PTSD; TBI; sexual assault; or sexual harassment. Special consideration will be given to Department of Veterans Affairs (VA) determinations that document a mental health condition, including PTSD; TBI; or sexual assault/harassment potentially contributed to the circumstances resulting in a less than honorable discharge characterization. Special consideration will also be given in cases where a civilian provider confers diagnoses of a mental health condition, including PTSD; TBI; or sexual assault/harassment if the case records contain narratives supporting symptomatology at the time of service or when any other evidence which may reasonably indicate that a mental health condition, including PTSD; TBI; or sexual assault/harassment existed at the time of discharge might have mitigated the misconduct that caused a discharge of lesser characterization.

**(2)** Conditions documented in the service record that can reasonably be determined to have existed at the time of discharge will be considered to have existed at the time of discharge. In cases in which a mental health condition, including PTSD; TBI; or sexual assault/harassment may be reasonably determined to have existed at the time of discharge, those conditions will be considered potential mitigating factors in the misconduct that caused the characterization of service in question. All Boards will exercise caution in weighing evidence of mitigation in cases in which serious misconduct precipitated a discharge with a less than Honorable characterization of service. Potentially mitigating evidence of the existence of undiagnosed combat related PTSD, PTSD-related conditions due to TBI or sexual assault/harassment as causative factors in the misconduct resulting in discharge will be carefully weighed against the severity of the misconduct. PTSD is not a likely cause of premeditated misconduct. Caution shall be exercised in weighing evidence of mitigation in all cases of misconduct by carefully considering the likely causal relationship of symptoms to the misconduct.

**c.** Army Regulation 15-180 (Army Discharge Review Board), dated 25 September 2019, sets forth the policies and procedures under which the Army Discharge Review Board is authorized to review the character, reason, and authority of any Servicemember discharged from active military service within 15 years of the Servicemember's date of discharge. Additionally, it prescribes actions and composition of the Army Discharge Review Board under Public Law 95-126; Section 1553, Title 10 United States Code; and Department of Defense Directive 1332.41 and Instruction 1332.28.

**d.** Army Regulation 635-200 (Active Duty Enlisted Administrative Separations), set policies, standards, and procedures to ensure the readiness and competency of the force while providing for the orderly administrative separation of Soldiers for a variety of reasons. Readiness is promoted by maintaining high standards of conduct and performance.

**(1)** Chapter 3 provides an Honorable discharge is a separation with honor and is appropriate when the quality of the Soldier's service generally has met the standards of

acceptable conduct and performance of duty for Army personnel or is otherwise so meritorious that any other characterization would be clearly inappropriate.

(a) A General discharge is a separation from the Army under honorable conditions and is issued to a Soldier whose military record is satisfactory but not sufficiently meritorious to warrant an honorable discharge.

(b) An Under other-than-honorable-conditions discharge is an administrative separation from the Service under conditions other than honorable and it may be issued for misconduct, fraudulent entry, security reasons, or in lieu of trial by court martial based on certain circumstances or patterns of behavior or acts or omissions that constitute a significant departure from the conduct expected of Soldiers in the Army.

(2) Chapter 9 provides the authority and outlines the procedures for discharging Soldiers for alcohol or other drug abuse rehabilitation failure. Discharge is based upon alcohol or other drug abuse such as illegal, wrongful, or improper use of any controlled substance, alcohol, or other drugs when the soldier is enrolled in Alcohol and Drug Abuse Prevention and Control Program (ADAPCP) or when the commander determines that further rehabilitation efforts are not practical, rendering the soldier a rehabilitation failure. This determination will be made in consultation with the rehabilitation team. When the commander determines that a soldier who has never been enrolled in ADAPCP lacks the potential for further useful service, the soldier will be screened per AR 600–85. If found non-dependent, the soldier will not be rehabilitated but will be considered for separation under other appropriate provisions of this regulation. Separations for alcohol abuse rehabilitation failure will be reported separately from separations for drug abuse rehabilitation failure. If separation is based on both, the primary basis will be used for reporting purposes.

(3) A Soldier who is enrolled in the Alcohol and Drug Abuse Prevention and Control Program (ADADPCP) for alcohol/drug abuse may be separated because of their inability or refusal to participate in, cooperate in, or successfully complete such a program in one of the following circumstances: There is a lack of potential for continued Army service and rehabilitation efforts are no longer practical; and/or long term rehabilitation is necessary, and the Soldier is transferred to a civilian medical facility for rehabilitation

(4) Chapter 15 provides explicitly for separation under the prerogative of the Secretary of the Army. Secretarial plenary separation authority is exercised sparingly and seldom delegated. Ordinarily, it is used when no other provision of this regulation applies, and early separation is clearly in the Army's best interest. Separations under this paragraph are effective only if approved in writing by the Secretary of the Army or the Secretary's approved designee as announced in updated memoranda. Secretarial separation authority is normally exercised on a case-by-case basis.

e. Army Regulation 635-5-1 (Separation Program Designator (SPD) Codes) provides the specific authorities (regulatory or directive), reasons for separating Soldiers from active duty, and the SPD codes to be entered on the DD Form 214. It identifies the SPD code of "JPC" as the appropriate code to assign enlisted Soldiers who are discharged under the provisions of Army Regulation 635-200, Chapter 9, Drug Rehabilitation Failure.

f. Army Regulation 601-210, Regular Army, and Reserve Components Enlistment Program, governs eligibility criteria, policies, and procedures for enlistment and processing of persons into the Regular Army, the U.S. Army Reserve, and Army National Guard for enlistment per DODI 1304.26. It also prescribes the appointment, reassignment, management, and mobilization of Reserve Officers' Training Corps cadets under the Simultaneous Membership Program.

Chapter 4 provides the criteria and procedures for waiverable and nonwaiverable separations. Table 3-1, defines reentry eligibility (RE) codes:

(1) RE-1 Applies to: Person completing his or her term of active service who is considered qualified to reenter the U.S. Army. Eligibility: Qualified for enlistment if all other criteria are met.

(2) RE-3 Applies to: Person who is not considered fully qualified for reentry or continuous service at time of separation, but disqualification is waiverable. Eligibility: Ineligible unless a waiver is granted.

(3) RE-4 Applies to: Person separated from last period of service with a nonwaiverable disqualification. This includes anyone with a DA imposed bar to reenlistment in effect at time of separation or separated for any reason (except length of service retirement) with 18 or more years active Federal service. Eligibility: Ineligible for enlistment.

g. Army Regulation 600-85 (Army Substance Abuse Program (ASAP)), provided a comprehensive alcohol and drug abuse prevention and control policies, procedures, and responsibilities for Soldiers for ASAP services. The ASAP is a command program that emphasizes readiness and personal responsibility. The ultimate decision regarding separation or retention of abusers is the responsibility of the Soldier's chain of command. Abuse of alcohol or the use of illicit drugs by military personnel is inconsistent with Army values and the standards of performance, discipline, and readiness necessary to accomplish the Army's mission.

(1) Unit commanders must intervene early and refer all Soldiers suspected or identified as alcohol and/or drug abusers to the ASAP. The unit commander should recommend enrollment based on the Soldier's potential for continued military service in terms of professional skills, behavior, and potential for advancement.

(2) ASAP participation is mandatory for all Soldiers who are command referred. Failure to attend a mandatory counseling session may constitute a violation of Article 86 (Absence Without Leave) of the UCMJ.

(3) Alcohol and/or other drug abusers, and in some cases dependent alcohol users, may be enrolled in the ASAP when such enrollment is clinically recommended. Soldiers who fail to participate adequately in, or to respond successfully to, rehabilitation will be processed for administrative separation and not be provided another opportunity for rehabilitation except under the most extraordinary circumstances, as determined by the Clinical Director in consultation with the unit commander.

(4) All Soldiers who are identified as drug abusers, without exception, will be referred to the ASAP counseling center for screening; be considered for disciplinary action under the UCMJ, as appropriate; and be processed for administrative separation in accordance with Army Regulation 635-200.

**7. SUMMARY OF FACT(S):** The Army Discharge Review Board considers applications for upgrade as instructed by Department of Defense Instruction 1332.28.

a. The applicant requests an upgrade to Honorable. The applicant's Army Military Human Resources Record (AMHRR), the issues, and documents submitted with the application were carefully reviewed.

b. The available evidence provides the applicant enlisted in the RA. On 6 June 2014, they were command-referred to ASAP following an arrest and completed three individual counseling sessions, two group sessions, and the 14-hour Prime for Life course. ASAP was informed by the applicant of their marijuana use since the last group session conducted on 3 July 2014. Therefore, due to the violation of ASAP policy, the applicant's rehabilitation prognosis was deemed poor and they were further determined an ASAP Rehabilitation Failure. Separation proceedings were initiated under the provisions of AR 635-200, Chapter 9, Drug Rehabilitation Failure, with a General (Under Honorable Conditions) characterization of service. They completed 1 year, 6 months, and 21 days of their 4 year-19 week contractual obligation.

(1) They provided a self-authored statement with the separation proceedings, which spoke of the two tragic deaths of their friends (one by suicide) which caused their depression and led to their multiple suicide attempts. The applicant admitted to having self-medicated once with marijuana; however, never received any positive urinalyses, as they were tested three times from that point. The applicant revealed once they were in ASAP treatment, the command mistreated the applicant by screaming them out of offices, harassed them in their barracks room, threatened them, and attempted to have the applicant go AWOL instead of waiting for the completion of their discharge. They are requesting an Honorable.

(2) The applicant provided treatment records for three different facilities both residential and intensive outpatient programs between July and December 2016 for PTSD, Unspecified; Opioid Use Disorder, Severe; and Unspecified Opioid-Related Disorder. They have been sober and in recovery for 3.5 years and counting.

c. Chapter 9 establishes policy and prescribes procedures for members being separated for alcohol or other drug abuse rehabilitation failure. The service of Soldiers discharged under this section will be characterized as honorable or under honorable conditions unless the Soldier is in entry-level status and an uncharacterized description of service is required. The separation authority will approve separation in cases processed without an administrative board if the documentation in the file indicates required rehabilitative efforts have been made, further rehabilitative efforts are not practical, rendering the soldier a rehabilitation failure, and the soldier's potential for fully effective service is substantially reduced by alcohol/drug abuse.

d. Published Department of Defense guidance indicates that the guidance is not intended to interfere or impede on the Board's statutory independence. The Board will determine the relative weight of the action that led to the discharge and whether it supports relief or not. In reaching its determination, the Board shall consider the applicant's petition, available records and/or submitted documents in support of the petition.

## 8. BOARD DISCUSSION AND DETERMINATION:

a. As directed by the 2017 memo signed by A.M. Kurta, the board considered the following factors:

(1) Did the applicant have a condition or experience that may excuse or mitigate the discharge? **Yes.** The Board's Medical Advisor, a voting member, reviewed the applicant's DOD and VA health records, applicant's statement, and/or civilian provider documentation and found that the applicant has the following potentially-mitigating diagnoses: Bereavement, a variety of substance disorders, Adjustment Disorder, Generalized Anxiety Disorder (GAD), and PTSD

(2) Did the condition exist or experience occur during military service? **Yes.** Bereavement, Alcohol Dependence

**(3)** Does the condition or experience actually excuse or mitigate the discharge? **No.** The Board's Medical Advisor applied liberal consideration and opined that there is no indication he had a clinically significant condition impacting judgement prior to or at the time of the misconduct. However, the Board could consider he reported self-medication for bereavement symptoms prior to ASAP enrollment that could have contributed.

**(4)** Does the condition or experience outweigh the discharge? **Yes.** After applying liberal consideration to the evidence, including the Board Medical Advisor's opine, the Board determined that the applicant's length of service outweighed the medically unmitigated list offenses.

**b.** Prior Decisions Cited: None

**c.** Response to Contention(s):

**(1)** The applicant seeks relief contending, they developed a substance abuse habit of drugs and alcohol, while in the service, which was introduced to them through their leadership and fellow junior enlisted Soldiers. They were given individual and group therapy but failed to stay sober outside of therapy. The applicant does not blame the Army and took full responsibility for their actions; however, if they were given the opportunity to go to a residential treatment facility, the applicant would have been able to complete their term. Since their discharge, they have been successfully treated and has remained sober for over 3.5 years and counting. They have included letters from a few of the many people who are close to them today. Moreover, since their sobriety, they have worked closely with the recovery community, including helping other veterans suffering from mental illness and substance abuse. A drug addiction destroyed their life and their ability to fulfill the commitment to their country. Therefore, they are requesting an Honorable discharge.

**(2)** Three Character Letters speak highly of the applicant and to their having accepted full responsibility for their choices, facing their addiction head on, helped others maintain their sobriety, and turned their life around, and today is an upstanding, Honorable, and responsible person.

**d.** The Board determined that the characterization of service was inequitable based on the applicant's length of service as an in-service mitigating factor. Accordingly, the Board voted to grant relief in the form of an upgrade to the characterization of service to Honorable. The Board determined the narrative reason/SPD code and RE code were proper and equitable and voted not to change them.

**e.** Rationale for Decision:

**(1)** The Board carefully considered the applicant's request, supporting documents, evidence in the records, a medical review, and published Department of Defense guidance for liberal consideration of discharge upgrade requests. The Board considered the applicant's statement, record of service, the frequency and nature of misconduct, and the reason for separation. The Board found sufficient evidence of in-service mitigating factors (Length) and concurred that although there is no indication he had a clinically significant condition impacting judgement prior to or at the time of the misconduct his post service accomplishments and length of service mitigates his misconduct. Based on a preponderance of evidence, the Board determined that the character of service the applicant received upon separation was inequitable and warranted an upgrade.

(2) The Board voted not to change the applicant's reason for discharge or accompanying SPD code, as the reason the applicant was discharged was both proper and equitable.

(3) The RE code will not change, as the current code is consistent with the procedural and substantive requirements of the regulation.

**9. BOARD ACTION DIRECTED:**

- a. **Issue a New DD-214:** Yes
- b. **Change Characterization to:** Honorable
- c. **Change Reason / SPD Code to:** No Change
- d. **Change RE Code to:** No Change
- e. **Change Authority to:** No Change

**Authenticating Official:**

10/24/2025

