



DEPARTMENT OF THE NAVY
BOARD FOR CORRECTION OF NAVAL RECORDS
701 S. COURTHOUSE ROAD, SUITE 1001
ARLINGTON, VA 22204-2490

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Docket No. 4118-25
Ref: Signature Date

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Dear Petitioner:

This is in reference to your application for correction of your naval record pursuant to Section 1552 of Title 10, United States Code. After careful and conscientious consideration of relevant portions of your naval record and your application, the Board for Correction of Naval Records (Board) found the evidence submitted insufficient to establish the existence of probable material error or injustice. Consequently, your application has been denied.

A three-member panel of the Board, sitting in executive session, considered your application on 6 August 2025. The names and votes of the members of the panel will be furnished upon request. Your allegations of error and injustice were reviewed in accordance with administrative regulations and procedures applicable to the proceedings of this Board. Documentary material considered by the Board consisted of your application, together with all material submitted in support thereof, relevant portions of your naval record and applicable statutes, regulations and policies, to include the 25 August 2017 guidance from the Office of the Under Secretary of Defense for Personnel and Readiness (Kurta Memo), the 3 September 2014 guidance from the Secretary of Defense regarding discharge upgrade requests by Veterans claiming post-traumatic stress disorder (PTSD) (Hagel Memo), and the 25 July 2018 guidance from the Under Secretary of Defense for Personnel and Readiness regarding equity, injustice, or clemency determinations (Wilkie Memo). The Board also considered the advisory opinion (AO) from a qualified mental health professional dated 3 February 2025 that was obtained during review of a previous request for relief.

The Board noted your previous requests, Docket Nos. 109-10 and 9072-24, requested an upgrade to your characterization of service from other than honorable (OTH) to general (under honorable conditions) and “an administrative medical discharge” respectively. Due to the new evidence¹ submitted with your current request for relief, the Board considered your request to upgrade your characterization of service to general (under honorable conditions); change your narrative reason for separation to reflect a “mental health basis;” acknowledgement of “the likelihood that [your]

¹ You submitted a letter dated 25 June 2024 which confirmed you were receiving mental health treatment for your diagnosed bipolar disorder and PTSD. In addition to your numerous statements, you also submitted “Supporting Documentation and Case Law – Mental Health and Discharge Characterization” which listed three legal cases.

in-service behavior was influenced by a then-undiagnosed mental health condition;” and any “additional findings or relief as appropriate under Section 1552 of Title 10, United States Code.”

In your current request, you again assert your in-service behavior that led to your involuntary discharge was the result of untreated and misdiagnosed psychiatric illness not willful misconduct. You further contend the command’s actions were “rooted in prejudice, misinterpretation, and an institutional failure to safeguard the mental health of its Marines.” Specifically, you contend the following:

(1) The record plainly shows you were not properly treated but instead you were “punished, pathologized, and discharged.” Specifically, you contend you were “bounced between stockade, sick bay, and court martial without psychiatric stabilization, continuity of care, or post-discharge medical outreach is not just incorrect.”

(2) Your command disregarded and dehumanized you as evidenced by the Commanding Officer’s own language in calling you a “basically unreliable individual whose unruly behavior can no longer be tolerated” and who is “of no value to the USMC.” Further, you contend these statements were not diagnostic; “they were condemnations devoid of compassion, reflective of a command culture that viewed mental illness not as a medical concern but as a liability to be ejected.”

(3) Your post-service diagnoses validate your in-service crisis. Specifically, you contend these “conditions weren’t invented post-discharge; they were simply not acknowledged in a Marine Corps environment that saw mental illness as weakness.”

(4) Your request for relief has a “legal and clinical foundation for relief.” Specifically, you contend *Beck v. West*, 13 Vet. App. 535 (2000); *Struck v. Brown*, 9 Vet. App. 145 (1996); and *Haselwander v. McHugh*, 774 F.3d 990 (2015) apply to your situation. Additionally, you contend DoDI 1332.28 & VA 38 CFR § 3.12(d) require liberal consideration of mental health in discharge cases.

(5) This is not an appeal for sympathy. It is a demand for accountability, rooted in facts. You were a young Marine that suffered a breakdown but the system ignored your crisis, the command dismissed your value, and this Board, even after receiving psychiatric advisory support, still defaulted to punishment over healing. This was not criminal behavior; it was the collapse of a Marine in need.

(6) Psychiatric Advisor’s statement was ignored or misapplied. Specifically, you contend the Board’s own clinical consultant strongly indicated the misconduct leading to discharge may have been the result of an undiagnosed mental illness, namely bipolar disorder. Further, despite this acknowledgement, you contend the Board upheld the discharge without offering an alternative resolution or even referencing the need to weigh mental health in the characterization process.

(7) The Board contradicted its own medical evidence. Specifically, you contend the AO recognized that: a) your mental health condition likely existed prior to the diagnosed TBI

or psychiatric hospitalization; b) your behavior was possibly the early manifestation of a mood disorder; and c) the “inadequate personality” diagnosis of 1979 is now clinically obsolete and likely masked symptoms of bipolar disorder. Despite these facts, you contend the Board stated the misconduct preceded PTSD or TBI and contradicted the AO’s statement that the symptoms may have predated the crisis events.

(8) The Board failed to consider potential alternative resolutions such as a change in the narrative reason or upgrade the characterization even after the AO’s remarks clearly opened the door for alternative consideration. You contend the Board’s failure to act on it represents an incomplete review.

The Board carefully reviewed your petition and the material you provided in support of your petition and disagreed with your rationale for relief. The Board determined the new evidence and the contentions, as discussed above, provide insufficient evidence of an error or injustice in the Marine Corps’ original decision to discharge you by reason of misconduct due to your frequent involvement with military authorities. Further, applying liberal consideration and relying on the AO, the Board again determined that, while there is post-service evidence of PTSD and in-service evidence of TBI, there is insufficient evidence to attribute your misconduct to PTSD or TBI. Again, the Board also noted the AO’s clinical opinion “[t]here is some evidence [your] in-service misconduct may be attributed to unrecognized, prodromal symptoms of Bipolar Disorder.” However, once again, even applying liberal consideration to your post-service mental health conditions and the AO’s findings, the Board determined there was insufficient evidence of a nexus between the post-service diagnoses and the in-service misconduct that led to your administrative separation by reason of misconduct. Additionally, the Board noted your cited case law is not applicable to your situation. Lastly, the Board considered your contention that your command’s actions were “rooted in prejudiced, misinterpretation, and an institutional failure to safeguard the mental health of its Marines” but noted you provided no evidence to support your contention.

The Board carefully reviewed your application, weighed all potentially mitigating factors, and considered your contention that your discharge was the result of untreated and misdiagnosed psychiatric illness and not willful misconduct. The Board also noted you did not submit advocacy letters or post-service documents to be considered for clemency purposes. Unfortunately, the Board did not find evidence of an error or injustice that warrants upgrading your characterization of service. The Board, relying on the AO and applying liberal consideration, concluded there was insufficient evidence of an error or injustice that warrants granting clemency in the form of an upgraded characterization of service.

The Board also carefully considered all potentially mitigating factors to determine whether the interests of justice warrant relief in your case in accordance with the Wilkie Memo. These included, but were not limited to, your desire to upgrade your discharge and your contentions discussed above. Based upon this review, the Board concluded these potentially mitigating factors were insufficient to warrant relief. Specifically, the Board determined your misconduct outweighed these mitigating factors. Accordingly, given the totality of the circumstances, the Board determined that your request does not merit relief.

In the absence of sufficient new evidence for reconsideration, the decision of the Board is final, and your only recourse would be to seek relief, at no cost to the Board, from a court of appropriate jurisdiction.

Sincerely,

8/25/2025

