DEFENSE LEGAL SERVICES AGENCY
DEFENSE OFFICE OF HEARINGS AND APPEALS
APPEAL BOARD

Date: July 22, 2026

In the matter of:	
------	ISCR Case No. 25-01519
Applicant for Security Clearance	

APPEAL BOARD DECISION

APPEARANCES

FOR GOVERNMENT
Andrea M. Corrales, Esq., Deputy Chief Department Counsel

FOR APPLICANT
Pro se

The Department of Defense (DoD) declined to grant Applicant a security clearance. On January 23, 2026, DoD issued a Statement of Reasons (SOR) advising Applicant of the basis of that decision – security concerns raised under Guideline G (Alcohol Consumption), Guideline I (Psychological Conditions), and Guideline F (Financial Considerations) of the National Security Adjudicative Guidelines (AG) in Appendix A of Security Executive Agent Directive 4 (effective June 8, 2017) and DoD Directive 5220.6 (Jan. 2, 1992, as amended) (Directive). On June 26, 2026, Defense Office of Hearings and Appeals Administrative Judge Mark Harvey denied Applicant national security eligibility. Applicant appealed pursuant to Directive ¶¶ E3.1.28 and E3.1.30.

The Judge found favorably on all Guideline F and Guideline I allegations, and those are not challenged on appeal. Under Guideline G, the SOR alleged Applicant's history of excessive alcohol consumption beginning in about 2015 and two alcohol-related diagnoses, including for alcohol dependence in April 2021 and for binge drinking in September 2025. In response to the SOR, Applicant admitted the concern about his drinking history but denied both allegations concerning diagnoses, all without further explanation. The Judge resolved the Guideline G concerns adversely, and those findings are the subject of Applicant's appeal.

Judge's Findings of Fact

Applicant, in his late 20s, was married in 2016 and has two minor children. He also graduated from high school in 2016 and began serving in the Army.

Applicant suffered physical, emotional, and sexual abuse by multiple family members during his adolescence. He first sought alcohol and mental health treatment at an Army medical center in April 2021, and he acknowledged struggling with alcoholism during his military service. Government Exhibit (GE) 6 at 16. The Judge made substantial findings based on Applicant's voluminous treatment notes and other medical records entered in evidence.

On April 13, 2021, Applicant participated in an intake evaluation with the Army medical center's Behavioral Health (BH) clinic and Substance Use Disorder Clinical Care (SUDCC) program, during which he reported lifelong feelings of paranoia and anxiety and significant, albeit fluctuating, regular alcohol consumption beginning when he was 18 years old. Applicant explained that he had been drinking large amounts of alcohol almost daily for the past 12 months due to his anxiety. GE 4 at 1038. He estimated his consumption to be about five or six beers daily during the week and 18 beers over the weekends. Applicant was diagnosed with moderate alcohol use disorder and referred for an initial follow-up appointment with SUDCC and BH for further assessments and recommendations. *Id*. at 1043.

During the initial therapy session on May 4, Applicant reported that he quit drinking "cold turkey" three weeks earlier, citing that there were better options to help him. *Id*. at 987. He asserted that "his alcohol use [was] no longer a big deal" and he was therefore "not willing to address alcohol issues [or his] history of heavy drinking." *Id*. at 1030, 1034. Because the provider was unable to assess the need for mandatory alcohol services and SUDCC enrollment, Applicant was advised that, if he could "maintain stability by avoiding alcohol," he would be deemed a BH referral and not enrolled in SUDCC. *Id*. at 1030. Applicant's treatment plan objectives included that he "[w]ill cease Alcohol usage" because that "is what originally prompted him to come to BH along with SUDCC issues, otherwise [he] may be re-assessed for an enrollment in SUDCC." *Id*. at 1035. Applicant's primary diagnosis was initially set as adjustment disorder. *Id*. at 1034.[1] Applicant testified that, when he stopped drinking in April 2021, it was out of concern about being discharged from the Army and lasted for about a month. Transcript (Tr.) at 85.

During a walk-in appointment on September 20, 2021, Applicant reported that "over the weekend, he got into an altercation with his wife[] and became irrationally angry," and that "he ended up shoving his wife at one point [and] punching holes in his door and ripped it totally off the hinges." GE 4 at 990. He endorsed alcohol use of about three or four beers, two or three times per week. Applicant's wife testified that he was intoxicated during the incident. Tr. at 31. The couple was referred to the family advocacy program for marital counseling. By his individual therapy session on October 26, 2021, Applicant "discussed a return to some 'binge' drinking" and acknowledged that he had "begun a self-destructive path again with recent bouts with alcohol" and anger around friends and family. GE 4 at 958.

[1] In January 2022, Applicant's primary diagnosis was modified to PTSD. *Id*. at 893.

During an individual therapy session on March 29, 2022, Applicant endorsed having suicidal ideations earlier that day but declined voluntary inpatient hospitalization. He was referred to the emergency department for further evaluation, during which he "admit[ted] to using alcohol to self-medicate" but reported that he was "already enrolled with SUDCC." *Id*. at 793. The record reflects that he was not. Applicant was found to not meet the criteria for involuntary hospitalization and was discharged the same day.

By April 2022, Applicant's counselor assessed that they had reached a Medical Retention Determination Point and that, since beginning treatment in May 2021, Applicant was "offered multiple types of therapy . . . with no real progress and worsening of symptoms, particularly of [post-traumatic stress disorder (PTSD)]." *Id*. at 757. Applicant was subsequently medically retired for PTSD and general anxiety disorder with an honorable discharge in September 2022.

On September 28, 2022, Applicant self-referred for continuity of mental health treatment and, during the Alcohol Use Screen, described his current alcohol consumption as four or more times per week, between three and six drinks per day. *Id*. at 663, 672. He contends, however, that he "quit drinking cold turkey around October 2022 and remained sober for a period of time." GE 6 at 16. In March 2024, Applicant began drinking non-alcohol beer to help him relax and, by June 2024, was drinking a few shots each night. *Id*. at 129, 181.

Applicant participated in a psychological evaluation on September 8, 2025, during which he reported "consuming about two beers every other night and four to six beers on Saturdays," and endorsed "becoming intoxicated by about five to six beers most Saturdays." GE 5 at 2.[2] The psychologist concluded that, despite the significant decrease from Applicant's prior pattern of alcohol consumption, his "history of heavier alcohol use and his current pattern of consuming five to six beers in one sitting . . . meets the criteria for binge drinking." GE 5 at 8.

Applicant asserted that, after he "was found to have low testosterone and poor sleep quality" in about November 2025, he decided to stop drinking completely on December 22, 2025, and has since "fully stabilized." GE 6 at16. Applicant's wife corroborated the timing of his latest sobriety but also testified that he has tried to stop drinking in the past and has relapsed on multiple occasions. Tr. at 32, 40. On March 24, 2026, he enrolled in the Department of Veterans Affairs' Substance Treatment and Recovery (STAR) program, through which he expected to attend eight psychotherapy sessions to address his alcohol consumption.

The Judge acknowledged the record's favorable evidence but concluded that "[t]he reasons for denying Applicant access to classified information are more persuasive than the reasons for granting access to classified information." Decision at 29.

Discussion

On appeal, Applicant challenges the Judge's mitigation and Whole-Person analyses and contends that the Judge "did not adequately evaluate" or "give[] appropriate weight" to the "substantial evidence demonstrating rehabilitation," including Applicant's December 2025

[2] In a subsequent disclosure on January 16, 2026, Applicant also described drinking one shot of liquor every other day until October 2025 and three or four beers each weekend day. GE 6 at 16.

cessation of alcohol use, voluntary enrollment in the STAR program, treatment compliance, and favorable psychological evaluations and professional opinions. Appeal Brief at 1.

Contrary to Applicant's argument, the Decision reflects that the Judge addressed that Applicant was supported by three coworkers and his wife, who represented that Applicant is friendly, honest, diligent, and responsible. Additionally, the Judge found that Applicant has shown some mental health improvement in the last year and acknowledged the positive assessments of the mental health professionals and Applicant's recent enrollment in the STAR program. The Judge ultimately concluded, however, that none of the Guideline G mitigating conditions applied considering Applicant's history of problematic alcohol-related behavior and relapse, the recency of his behavioral changes, and questions about credibility.

To that end, the Judge highlighted that some of Applicant's explanations were inconsistent with medical records and other evidence. For example, despite his repeated assertions that he voluntarily ceased all alcohol consumption in mid-December 2025, in a subsequent statement written on April 1, 2026, Applicant asserted that his "alcohol consumption has been significantly reduced from prior levels" and his "current use, if any, is moderate and controlled." Applicant Exhibit (AE) A at 28. At hearing, Applicant explained that his statement was meant "for future reference." Tr. at 105. A contemporaneous letter written by the psychologist involved in Applicant's March 2026 STAR program enrollment, however, also suggests the possibility of continued alcohol use, noting that Applicant "agreed to attend 8 psychotherapy sessions to help him evaluate his alcohol use and *consider the changes he wishes to make in his alcohol consumption*." AE A at 29 (emphasis added).

Additionally, the Judge found that credibility issues were presented by Applicant's failure to volunteer information about his alcohol consumption in his SCA. Through the SCA's four alcohol-related questions, Applicant was asked whether alcohol had a negative impact on him personally, professionally, or financially in the last seven years, or if he ever voluntarily sought or had been directed to seek alcohol treatment. He answered "No" to all questions, and the Judge found those responses were not forthcoming in light of other information from Applicant's medical records, including that he self-referred to SUDCC in April 2021 due to worsening drinking, that his subsequent month of sobriety was out of concern about being discharged from the Army, that alcohol negatively affected his marriage and contributed to a violent incident that triggered marital counseling in September 2021, and that his drinking and recommendations for abstinence were addressed throughout his years of therapy.

Citing that "Applicant has a long history of excessive alcohol consumption," that he has previously attempted sobriety and relapsed, and that his "medical records indicate a history of not wanting to reveal information about his alcohol consumption," the Judge questioned whether Applicant also "minimized his history and current levels of alcohol consumption" during his September 2025 evaluation or at hearing. Decision at 25. The Judge found that, even crediting Applicant with responsible drinking in 2025 and abstinence from December 2025 until his April 2026 hearing, those actions were insufficient to yet establish that the behavior is unlikely to recur or no longer casts doubt on his reliability, trustworthiness, and good judgment.

Applicant challenges the Judge's reliance on the foregoing "perceived inconsistencies" and argues that the Judge should have afforded "greater consideration" to Applicant's explanations

instead of the medical records because that the latter "are summaries prepared by healthcare providers rather than verbatim transcripts of conversations." Appeal Brief at 1. Applicant's argument is not persuasive.

Judges have broad discretion in weighing evidence and determining its credibility. *See* DISCR Case No. 91-0998, 1992 WL 388383 at *3 (App. Bd. Aug. 26, 1992); *Inwood Labs., Inc. v. Ives Labs., Inc.*, 456 U.S. 844, 856 (1982). Here, the Judge acknowledged the record's conflicting evidence, properly considered Applicant's explanations against the record as a whole, and made reasonable findings based thereon. We find no error in this regard. Moreover, the Judge's conclusion that, even crediting responsible drinking in 2025 and abstinence from December 2025 until the April 2026 hearing, Applicant's actions were insufficient to yet establish that the behavior is unlikely to recur or no longer casts doubt on his reliability, trustworthiness, and good judgment is well supported by the Appeal Board precedent to which he cites.

Conclusion

Applicant's argument advocating for a different weighing of the evidence fails to demonstrate that the decision was arbitrary, capricious, or contrary to law. *See* ISCR Case No. 04-08975, 2006 WL 2725032 at *1 (App. Bd. Aug. 4, 2006). Rather, the Judge examined and weighed the disqualifying and mitigating evidence and articulated a satisfactory explanation for the decision. The record is sufficient to support that the Judge's findings and conclusions are sustainable. "The general standard is that a clearance may be granted only when 'clearly consistent with the interests of the national security.'" *Dep't of the Navy v. Egan*, 484 U.S. 518, 528 (1988). "Any doubt concerning personnel being considered for national security eligibility will be resolved in favor of the national security." AG ¶ 2(b).

Order

The decision in ISCR Case No. 25-01519 is **AFFIRMED**.

Signed: Moira Modzelewski
Moira Modzelewski
Administrative Judge
Chair, Appeal Board

Signed: Allison Marie
Allison Marie
Administrative Judge
Member, Appeal Board

Signed: Eric H. Borgstrom
Eric H. Borgstrom
Administrative Judge
Member, Appeal Board