

RECORD OF PROCEEDINGS  
AIR FORCE BOARD FOR CORRECTION OF MILITARY RECORDS

IN THE MATTER OF:

DOCKET NUMBER: 98-01241

COUNSEL: NONE

HEARING DESIRED: NO

SEP 08 1998

---

APPLICANT REQUESTS THAT:

His assignment to [REDACTED] be canceled.

---

APPLICANT CONTENDS THAT:

His follow-on assignment from Air War College (AWC) to [REDACTED] as a Flight Surgeon is well below his qualification and is an act of reprisal.

The applicant states that he is an Aerospace Medicine (physician) specialist. He completed the Residency in Aerospace Medicine (RAM) in 1990, and he is board-certified in this specialty. His entire operational career in the Air Force has been spent working in this area of specialty.

The applicant notes that on 23 November 1996, the Medical Service Corps Education Board non-selected him for Senior Service School (SSS) in-residence. He appealed the decision to the AFBCMR and subsequently, AFPC was directed to award him an SSS quota for in-residence attendance in 1997. As a result of the AFBCMR's ruling, AFPC/CC questioned his selection for attendance at AWC versus the AFBCMR directing recompetition by a supplemental school's board. He asked [REDACTED] at AFPC/DPAMS which of the 3 SSSs he would attend and was verbally threatened with reprisal should he appeal further to the AFBCMR to request a quota for National Defense University (NDU) versus AWC at Maxwell AFB.

He immediately prepared a memorandum for record (MFR) and apprised [REDACTED] supervisor, [REDACTED] of the conversation. He was reluctant to believe [REDACTED] was capable of such conduct. He also discussed [REDACTED] conversation with his rating chain and [REDACTED] of [REDACTED] who handled his earlier promotion appeal. Subsequently, he received a copy of a memorandum to SAF/MIBR from [REDACTED] Office of the Surgeon General (AF/SG), which clearly was intended to discredit his eligibility and qualifications for SSS. He notes that in the last paragraph of

the memorandum it stated, "applicant's record was not selected by the supplemental board. He has not completed any level of Professional Military Education." First, he was never entered into a supplemental board as it was only going to board colonels and he had a directed quota from AFBCMR. Second, the issue of no prior Professional Military Education (PME) is irrelevant since it is not a criteria for SSS selection. Third, and most important, [REDACTED] or [REDACTED] violated his privacy by disclosing details of his appeal to AF/SG. They further violated the spirit of the AFBCMR's intent to correct his military records to show that he was considered and selected for SSS on the first selection board held. While they may have needed to inform AF/SG that he was going to SSS, it was a gross miscarriage of justice to expose the details of his appeal, or for them to interject their opinion of his "worthiness" to attend SSS.

The applicant states that he was given an SSS quota for AWC at Maxwell AFB. It was clear there was some manner of defiance and consternation in the medical community over the AFBCMR's decision to grant him a SSS quota outright. He notes that he has done well in AWC at Maxwell and will graduate 1 June 1998. He is now appealing to the AFBCMR, because he was given a 4-hour notice that he would be placed on assignment since he had not been selected for any Squadron Commander jobs he had volunteered for. He has been assigned as a [REDACTED] which is well below his qualifications as he has held the same position on two previous assignments as a major. Furthermore, this job will not utilize his medical expertise nor is it commensurate with his AWC attendance. There is no benefit here for the Air Force. This will definitely send a message to the colonel promotion board (which he meets BPZ in November 1998) that he is going nowhere in his career development. This will significantly affect his competitiveness in all of his future promotion boards, and all future jobs. This negates the value of having attended SSS in-residence and defies his performance record.

The applicant states that in September 1997, an assignment team from AFPC, came to AWC to brief them on how they were going to "hand massage" all of their assignments and have them assigned by February 1998. The message was that they were of special significance to the Air Force because they were in the top 10% of officers and clearly "marked" for senior leadership. He felt confident that he would have no trouble qualifying or being placed into a challenging leadership position upon graduation. They also provided time slots allocated to discussing assignments with each resource manager one-on-one. When he tried to sign-up, the roster was full and he was unable to meet his assignments officer face-to-face; however he does not believe this impacted the current situation.

On 27 October 1997, he received the following message from AFPC, "Coordination with [REDACTED] will Proceed for a 98 job. If you have not already spoken with [REDACTED], please give him a call at DSN [REDACTED]. AFPC has a squadron command position in mind,

*which will then set you up for a group command after you pin on 06 (Colonel). Thanks."*

On 12 January 1998, all the medical corps students at AWC received a notification from the assignments branch at AFPC. Clearly he was identified to be assigned as a squadron commander. He replied on 26 January 1998, opening a dialogue that reflected his intent and preferences. On 6 February 1998, he e-mailed AFPC assignments personnel asking for a clarification on the assignment process for him. They promptly replied on 6 and 7 February 1998. From January 1998 to the present, a litany of communiques have occurred between himself, AFPC, and the RAM assignments advisor to AFPC.

He would beg the Board's indulgence to read the "pink slip" marked messages. This will clearly demonstrate his endeavor to communicate his preferences based on experience, expertise and expectations he would believe the Air Force would have of someone graduating from AWC. Clearly, he has done the best he could to avail himself to a fitting, challenging Aerospace Medicine Squadron (AMDS) or Aerospace Medicine/Dental Squadron (ADOS) Commander position. One could argue he failed to aggressively volunteer for all available positions advertised, (Commander jobs or any other Medical jobs), but it was his understanding that this was a voluntary process and he should look at job progression. In point of fact, he is the only lieutenant colonel aerospace medicine specialist at any SSS in residence.

It is his deduction that relatively little energy has been expended by the medical assignments personnel to "sell" him to the Air Force community as a top contender. He has come to find out from AFPC/DPAI that it is incumbent upon him to "sell himself to Wing Commanders and that it is both his qualifications and reputation that determine his selection as a squadron commander. If there is anything derogatory about his reputation, he would contend that the most likely source was from [REDACTED] inappropriate action of reporting details of his AFBCMR appeal to AF/SG and the letter sent to SAF/MIBR on 15 April 1997. He believes that he "poisoned the well" and has gotten the medical assignments people to make good on his threat of "You may win the battle (go to SSS) but lose the war (a good assignment)." Other than that, he has no reason to think that he has less than a superior reputation

The applicant finds it unfathomable that he has not received, what he considers, mid-level responsibility Squadron Commander positions at [REDACTED], particularly in light of the fact that [REDACTED] ( [REDACTED] ) said these were the type of jobs he should volunteer for. He has availed himself to these aforementioned assignments quite commensurate with his skills and experience.

He volunteered for the [REDACTED] position. He received numerous messages from [REDACTED] at AF/SG and personally spoke

with the incumbent [REDACTED] as well as dialoguing with AFPC. At first, it appeared he would be an excellent match for the job. Then as time went by, allegedly, the Wing Commander preferred a colonel (Dentist) to take command in order to avoid a rank inversion situation as there was allegedly a colonel working in Dentistry. Rank inversion, he believes, is not a significant issue in the Medical Services Corps (MSC). He notes that while serving as [REDACTED] he was a captain and had a major working for him. While in the same job capacity at [REDACTED], he was a new major and had a lieutenant colonel and a colonel working for him. There were no problems.

He also competed for [REDACTED] S Squadron Commander, as did 19 other people. The person selected is a lieutenant colonel Optometrist, two years junior in rank to him, and no SSS in-residence. Further, he is presently an AMDS Squadron Commander at [REDACTED] since [REDACTED]. He doesn't need a second command position.

He also volunteered for Squadron Commander at [REDACTED], but that job went to a flight surgeon who had been assigned there previous to his current assignment at [REDACTED].

Attempting to remain objective, and with 4 weeks before SSS graduation, he appeals to the AFBCMR to intervene into his assignment process because it appears certain that he is being "aimed" in the wrong direction.

The applicant states that he has to address the issue of reprisal that began with his selection for SSS. The personnel involved then, [REDACTED] - and [REDACTED] have since PCS'd. However, they worked in the same directorate as the current medical assignment personnel and may have been in a position to "flag" his record as a "trouble-maker" because of his appeal to the BCMR for SSS attendance. Add to this, the "flare" that was sent to AF/SG and a reply from same to SAF/MIBR and him, highlighted him as a "problem person." His current dilemma, and the association of previous and current medical personnel at AFPC, seem unquestionably related.

He trusted the assignment system to place him in a position commensurate with his abilities and AWC attendance. When he received the initial reprisal threats from [REDACTED], the AFBCMR was made aware of the situation. They became concerned also for his "survival" after AWC and asked to be kept apprised of his assignment outcome. Since he has been assigned to a position (Flight Surgeon) of lesser responsibility than SSS graduation would have normally called for, he implores the AFBCMR to review his assignment selection and intervene to correct this error. He is not asking for a specific job, or even a Commander position, even though the medical assignments people have stated that would be his logical job progression. He only asks the AFBCMR to ensure he is not victimized by this reprisal and grant

him a follow-on assignment from AWC that will best use his skills and benefit from his SSS attendance.

Applicant's complete submission is attached at Exhibit A.

---

STATEMENT OF FACTS:

Applicant is currently serving on extended active duty in the grade of lieutenant colonel.

On 21 February 1997, applicant submitted an application to the Board requesting that he be awarded an SSS quota for 1997. After reviewing the evidence submitted, the Board found that applicant's record, when considered by the PME Selection Board in November 1996, reflected that he was selected for promotion to the grade of lieutenant colonel above-the-promotion-zone which placed him at a distinct disadvantage. As a result of his selection for promotion to lieutenant colonel by a Special Selection Board (SSB), he was, in fact, selected in-the-promotion-zone. In addition, the Board found that his latest Officer Performance Report (OPR) was not a matter of record when considered for PME selection. The Board concluded that had the applicant's records been correct at the time he was considered by the PME selection board in 1996, he would have been selected for SSS.

Applicant completed Air War College (AWC) in June 1998 and has assignment orders to the [REDACTED] with a reporting date of not later than 30 June 1998.

---

AIR FORCE EVALUATION:

The Chief, Medical Service Officer, AFPC/DPAM, reviewed this application and states the following:

a. The applicant contends that based on the interactions he had with personnel assigned to AFPC/DPAM he has been flagged as a troublemaker. However, AFPC/DPAM is not aware of any reprisal activities which the applicant alleges took place. No one in AFPC/DPAM was influenced by prior issues associated with the applicant. The issue of a prior BCMR was unknown to [REDACTED] until the applicant filed his appeal. In the Fall of 1997, [REDACTED] of AFPC/[REDACTED] visited AFPC/[REDACTED] and spoke with [REDACTED] and [REDACTED] about the applicant, indicating [REDACTED] was following his future assignment progress because he had been involved in an incident that might make him subject to reprisals. [REDACTED] did not elaborate, and neither [REDACTED] or [REDACTED] had knowledge of his prior AFBCMR appeal. At no time during the assignment selection process for the applicant were any of the individuals

named by him contacted for information concerning his projected assignment. Neither [REDACTED], or [REDACTED] solicited [REDACTED] --, [REDACTED] or [REDACTED] for their opinion. In fact, all attempts were made to promote the applicant into the jobs he was seeking.

b. The applicant contends the position is well below his qualifications since he has held the same position on two previous assignments as a major, the job will not utilize his medical expertise, and is not commensurate with his AWC attendance. In this regard, AFPC/DPAM notes that the Officer Assignment System (OAS) is based upon members volunteering for advertised positions and being selected by the hiring authority. AFPC advertises positions and provides lists of qualified and eligible candidates to hiring authorities for selection. AFPC also brokers with hiring authorities when members must move and have not secured a job. Occasionally, AFPC assigns officers in conjunction with mission requirements when there is no volunteer. This is done with the officer's proper professional development in mind. AFPC/DPAM is not the hiring authority except for the few officers assigned to AFPC/DPAM. In the applicant's case, he volunteered for five assignments, including two aerospace medicine squadron commander assignments. He was not selected by the hiring authority for all five of those assignments. His name was also added by [REDACTED] to job ads for two medical operations squadrons and one job ad for an aerospace medicine squadron. However, based on his stated desire to remain in aerospace medicine-related positions, [REDACTED] withdrew his name from the two medical operations squadron ads. A hiring decision is still pending on the aerospace medicine squadron, and the applicant is one of a number of highly qualified volunteers.

AFPC/DPAM states that one of the positions the applicant applied for, is [REDACTED], which is comparable to the position he is being assigned to at the [REDACTED]. On 20 May 1998, [REDACTED] sent the applicant an update on his projected assignment changing his duty title, position number, squadron, and grade commensurate with clarifications by [REDACTED].

Utilization of the applicant's medical expertise will be in his new position as Chief of Aerospace Medicine. The applicant is residency trained in aerospace medicine, and he will be the only residency trained Flight Surgeon assigned to the [REDACTED]. Clearly, his assignment as the Flight Commander of Aerospace Medicine is commensurate with his grade, expertise, and training and matches requirements of the job.

The applicant's AWC attendance as a junior lieutenant colonel was an aberration of typical attendance. The applicant's physician classmates are [REDACTED], [REDACTED], [REDACTED], and [REDACTED]. Usually, senior lieutenant colonels, or more frequently colonels, are selected for attendance. His attendance in a

junior grade makes him ineligible for the jobs his classmates were considered for, but should reflect favorably in his Master Personnel File for future opportunities and promotion. He will be able to apply his AWC experience to this position as he would any other position of leadership.

AFPC/DPAM cannot grant the applicant's request to be assigned as an overage to the School of Aerospace Medicine at ██████████ as an academic instructor for several reasons. There is a shortage of 73 flight surgeons this year. Assignment of an overage would not be effective utilization of resources. Secondly, AFPC has not received a request from the school to fill any vacancy which the member would qualify to fill. Thirdly, there is a valid vacancy at ██████████ which needs to be filled. And fourth, ██████████ is downsizing. Sending in a overage would not assist the organization in personnel reductions.

The applicant believes the projected assignment will negatively impact future promotion opportunities. However, the applicant's assignment as a lieutenant colonel Flight Commander is not unusual. The Air Force has a total of 68 lieutenant colonel authorizations for Air Force Specialty Code 48A (Residency in Aerospace Medicine), excluding squadron commander billets and an additional 19 commander, AFSC 48A, slots. There are a total of 68 lieutenant colonel, AFSC 48A, and an additional 18 lieutenant colonel, AFSC 48A, in training. Of the 68 lieutenant colonel, AFSC 48A, in the inventory, 24 are squadron commanders and 7 are flight commanders. The 37 remaining are employed in a variety of jobs other than commanders and most are clinical positions. Additionally, promotion opportunities are based on the whole person concept which would encompass, but not be limited to, the member's entire career, board certifications, performance reports, decorations, PME accomplishment, and promotion recommendation of the senior rater.

AFPC/DPAM states that the applicant should take the position with the knowledge that he is going to the best. job that he was selected for by the hiring authority. By impressing his commander with his new talents, he will build on his career record and enhance his competitiveness for jobs of increasing responsibility. Reprisal was never in the minds of AFPC/DPAM personnel while working the applicant's assignment.

A complete copy of the evaluation is attached at Exhibit C.

---

APPLICANT'S REVIEW OF AIR FORCE EVALUATION:

Applicant reviewed the Air Force evaluation and states that there are many inaccuracies and exclusion of germane items of vital importance. He states that he is a specialist in the area of aerospace medicine and he is very familiar with career development and appropriateness of assignments. He still

contends that he is a victim of reprisal by personnel at AFPC medical assignments. He states that although they deny the allegation, the elements that comprise a reprisal complaint have been confirmed by the [REDACTED] AFB Inspector General (IG). The [REDACTED] AFB IG report has been forwarded to the Air Force IG (AF/IG) and is expected to require several months to process due to a back log. He contends that although the former personnel in medical assignments were not logically solicited; he states that it is more likely that the incumbent personnel had apprised his successors of his case before he left AFPC to go to his new assignment. He further states that he would not expect these personnel to admit to this illegal activity. That is for an IG to investigate. Nonetheless, the ingredients for reprisal are all present. It begins with a threat and ends with an unfavorable personnel action. In reference to AFPC stating that the OAS is based upon members volunteering for advertised positions and being selected by the hiring authority, he states that his analysis of this operation is a capricious "good old boy" system that allows AFPC to abandon personnel to the mercy of luck, or if they decide otherwise, they intervene on a person's behalf to get them placed into an appropriate job. He has seen no evidence of AFPC brokering on his behalf. He states that he has been in a must-move position since being assigned to AWC in August of 1997. AFPC personnel came to AWC and assured them they would get them appropriate jobs because they were to be placed ahead of those individuals not in attendance at AWC. In reference to the statement that he volunteered for five assignments, he states that he volunteered for thirteen. He also states that he did not volunteer to be [REDACTED]. He was given a four-hour notification to pick an assignment by close of business with the understanding that when he was selected for a squadron commander's job, that what he agreed to then would become null and void. During a telephone conversation with a [REDACTED] from AFPC, he was asked for a geographical preference and replied, [REDACTED]. That is how he became a volunteer for the non-squadron commander's job. He states that he was sent an urgent e-mail message, stating that they had made a mistake about the [REDACTED] job. He was told that he would not be the Chief of Aeromedical Services after all. Instead, he would be Flight Commander. He was given a different position number, but the gist is that it is the same job as Chief of Aerospace Medicine, just a fancier title with the word commander salted into it. He states that a flight commander is the same thing as Chief of Aeromedical Services. It is the same job that is well beneath his qualifications and experience. He states that this is mere semantics and even AFPC proves that by it being said that he volunteered for [REDACTED] and saying it's the same job as [REDACTED]. He states that these semantics are comparable to a janitor being called a sanitation engineer. He states that this act alone is convincing evidence that the medical assignments personnel at AFPC have not done their job in placing him into command nor does he have any reason to believe they will. As far as he knows, the AMDS Squadron Commander job at [REDACTED] is still open with

numerous candidates. He respectfully requests the Board consider placing him into the job before some else is chosen and there are no options. He believes a quick placement as AMDS Squadron Commander at [REDACTED] will challenge him sufficiently and he will serve the Air Force well.

Applicant's complete response is attached at Exhibit E.

---

THE BOARD CONCLUDES THAT:

1. The applicant has exhausted all remedies provided by existing law or regulations.
  2. The application was timely filed.
  3. Insufficient relevant evidence has been presented to demonstrate the existence of probable error or injustice. After thoroughly reviewing the evidence of record and noting the applicant's contentions, we are not persuaded that the applicant's assignment to [REDACTED] should be canceled. The applicant believes the assignment is well below his qualifications. However, it appears the applicant's medical expertise will be utilized in his assignment as the Flight Commander of Aerospace Medicine and is commensurate with his grade, expertise, and training. We note that applicant has filed an AF/IG complaint and if the results of that investigation reveal that his assignment was based on anything other than the needs of the Air Force, he is encouraged to request reconsideration of his application. Therefore, in the absence of evidence to the contrary, we find no basis upon which to recommend favorable consideration of the relief sought in this application.
- 

THE BOARD DETERMINES THAT:

The applicant be notified that the evidence presented did not demonstrate the existence of probable material error or injustice; that the application was denied without a personal appearance; and that the application will only be reconsidered upon the submission of newly discovered relevant evidence not considered with this application.

---

The following members of the Board considered this application in Executive Session on 11 June 1998, under the provisions of AFI 36-2603:

Mr. Thomas S. Markiewicz, Panel Chair  
Mr. Robert W. Zook, Member  
Ms. Olga M. Crerar, Member  
Mr. Phillip E. Horton, Examiner (without vote)

The following documentary evidence was considered:

- Exhibit A. DD Form 149, dated 28 Apr 98, w/atchs.
- Exhibit B. Applicant's Master Personnel Records.
- Exhibit C. Letters, AFPC/DPAM, dated 21 May & 4 Jun 98, w/atchs.
- Exhibit D. Letter, AFBCMR, dated 8 Jun 98.
- Exhibit E. Letter, Applicant, dated 8 Jun 98

  
THOMAS S. MARKIEWICZ  
THOMAS S. MARKIEWICZ  
Panel Chair