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**United States Department of Energy  
Office of Hearings and Appeals**

In the Matter of: Personnel Security Hearing )  
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Filing Date: May 5, 2025 ) Case No.: PSH-25-0115  
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Issued: February 27, 2026

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**Administrative Judge Decision**

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Kristin L. Martin, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXXXX (hereinafter referred to as “the Individual”) for access authorization under the Department of Energy’s (DOE) regulations set forth at 10 C.F.R. Part 710, entitled, “Procedures for Determining Eligibility for Access to Classified Matter and Special Nuclear Material or Eligibility to Hold a Sensitive Position.”<sup>1</sup> For the reasons set forth below, I conclude that the Individual’s security clearance should be granted.

**I. BACKGROUND**

The Individual is employed by a DOE Contractor in a position which requires that he hold a security clearance. Derogatory information was discovered regarding his alcohol consumption. The Local Security Office (LSO) began the present administrative review proceeding by issuing a Notification Letter to the Individual informing him that he was entitled to a hearing before an Administrative Judge in order to resolve the substantial doubt regarding his eligibility to hold a security clearance. *See* 10 C.F.R. § 710.21.

The Individual requested a hearing and the LSO forwarded the Individual’s request to the Office of Hearings and Appeals (OHA). The Director of OHA appointed me as the Administrative Judge in this matter. At the hearing I convened pursuant to 10 C.F.R. § 710.25(d), (e), and (g), the Individual presented the testimony of three witnesses, in addition to his own. The LSO presented the testimony of the DOE psychologist who had evaluated the Individual. *See* Transcript of Hearing, OHA Case No. PSH-25-0115 (hereinafter cited as “Tr.”). The LSO submitted ten exhibits, marked as Exhibits 1 through 10 (hereinafter cited as “Ex.”).<sup>2</sup> The Individual submitted twelve exhibits, marked as Exhibits A through L.

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<sup>1</sup> Under the regulations, “[a]ccess authorization’ means an administrative determination that an individual is eligible for access to classified matter or is eligible for access to, or control over, special nuclear material.” 10 C.F.R. § 710.5(a). Such authorization will also be referred to in this Decision as a security clearance.

<sup>2</sup> Citations to DOE Exhibits will use the Bates stamp page number.

## II. THE NOTIFICATION LETTER AND THE ASSOCIATED SECURITY CONCERNS

As indicated above, the Notification Letter informed the Individual that information in the possession of the DOE created a substantial doubt concerning his eligibility for a security clearance. That information pertains to Guideline G of the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position*, effective June 8, 2017 (Adjudicative Guidelines). These guidelines are not inflexible rules of law. Instead, recognizing the complexities of human behavior, these guidelines are applied in conjunction with the factors listed in the adjudicative process. 10 C.F.R. § 710.7.

Guideline G states that excessive alcohol consumption often leads to the exercise of questionable judgment or the failure to control impulses and can raise questions about an individual's reliability and trustworthiness. Adjudicative Guidelines at ¶ 21. Conditions that could raise a security concern include:

- (a) Alcohol-related incidents away from work, such as driving while under the influence, fighting, child or spouse abuse, disturbing the peace, or other incidents of concern, regardless of the frequency of the individual's alcohol use or whether the individual has been diagnosed with alcohol use disorder;
- (b) Alcohol-related incidents at work, such as reporting for work or duty in an intoxicated or impaired condition, drinking on the job, or jeopardizing the welfare and safety of others, regardless of whether the individual is diagnosed with alcohol use disorder;
- (c) Habitual or binge consumption of alcohol to the point of impaired judgment, regardless of whether the individual is diagnosed with alcohol use disorder;
- (d) Diagnosis by a duly qualified medical or mental health professional (*e.g.*, physician, clinical psychologist, psychiatrist, or licensed clinical social worker) of alcohol use disorder;
- (e) The failure to follow treatment advice once diagnosed;
- (f) Alcohol consumption, which is not in accordance with treatment recommendations, after a diagnosis of alcohol use disorder; and
- (g) Failure to follow any court order regarding alcohol education, evaluation, treatment, or abstinence.

*Id.* at ¶ 22.

The LSO alleges that:

- In 1997, the Individual was charged with Minor in Consumption;

- In June 2001, the Individual was charged with Alcohol Beverage—Unlawful Sale Minor/Intoxicated Person;
- In November 2001, the Individual was arrested and charged with Driving Under the Influence (DUI) after failing a sobriety test;
- Around 2004,<sup>3</sup> the Individual was arrested and charged with DUI after he crashed his car on the way home from a party at which he had been consuming alcohol;
- In August 2004, the Individual was charged with Violate Any Rules and Regulation for Use of Park for an alcohol-related incident;
- In May 2005, the Individual was charged with Disturbing the Peace for an alcohol-related incident;
- In October 2005, the Individual was charged with Excretion of Human Waste for an incident that involved alcohol;
- On another day in October 2005, the Individual was charged with Unlawful to Possess Alcohol in a [city name] Park;
- In March 2006, the Individual was charged with Resisting or Obstructing Officers for an alcohol-related incident;
- In November 2015, the Individual was arrested and charged with DUI and Open Container in Vehicle after failing a sobriety test;
- In May 2019, the Individual was arrested and charged with Operating Under the Influence of Alcohol or Drugs and Refusal to Submit to Chemical Test after refusing to blow into a breathalyzer during the traffic stop;
- From May 2020 to the time he completed his response to the LSO’s Letter of Interrogatory (LOI) in November 2024, the Individual consumed alcohol—two to six beers per sitting—two to three times per week; consumed alcohol to the point of intoxication on select weekends; and was intoxicated just three days prior to reporting the above;
- In February 2025, the Individual was evaluated by a DOE Contractor Psychologist (the Psychologist) and submitted to Phosphatidyl Ethanol (PEth)<sup>4</sup> testing. The test returned a result positive for alcohol consumption in the preceding thirty days, and the Psychologist opined that the Individual’s presentation warranted a diagnosis of Unspecified Alcohol-

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<sup>3</sup> The Individual initially reported this incident having occurred in November 2002, but later corrected himself, stating that he was charged in 2004. Ex. 6 at 27.

<sup>4</sup> A PEth test measures a blood sample for levels of an alcohol byproduct. *Direct Ethanol Biomarker Testing: PETH*, Mayo Clinic Laboratories, <https://news.mayocliniclabs.com/2022/09/13/direct-ethanol-biomarker-testing-peth-test-in-focus/> (last visited February 27, 2026). The test can detect alcohol consumption in the two to four weeks preceding the test. *Id.*

Related Disorder under the *Diagnostic and Statistical Manual for Mental Disorders, Fifth Ed., Text Revision* and that the Individual was not rehabilitated or reformed. He also opined that the Individual binge consumed alcohol to the point of impaired judgment.

Ex. 1 at 1–2.

The LSO alleges that Individual has a long history of legal trouble that appears to be consistently related to alcohol consumption. The LSO also alleges that the Psychologist opined that the Individual binge consumes alcohol to the point of impaired judgment and warrants a diagnosis of Unspecified Alcohol-Related Disorder. Accordingly, the LSO’s security concerns under Guideline G are justified. Adjudicative Guidelines at ¶ 22(a), (c)–(d).

### III. REGULATORY STANDARDS

A DOE administrative review proceeding under Part 710 requires me, as the Administrative Judge, to issue a Decision that reflects my comprehensive, common-sense judgment, made after consideration of all of the relevant evidence, favorable and unfavorable, as to whether the granting or continuation of a person’s access authorization will not endanger the common defense and security and is clearly consistent with the national interest. 10 C.F.R. § 710.7(a). The entire process is a conscientious scrutiny of a number of variables known as the “whole person concept.” Adjudicative Guidelines at ¶ 2(a). The protection of the national security is the paramount consideration. The regulatory standard implies that there is a presumption against granting or restoring a security clearance. *See Department of Navy v. Egan*, 484 U.S. 518, 531 (1988) (“clearly consistent with the national interest” standard for granting security clearances indicates “that security determinations should err, if they must, on the side of denials”); *Dorfmont v. Brown*, 913 F.2d 1399, 1403 (9th Cir. 1990) (strong presumption against the issuance of a security clearance).

The Individual must come forward at the hearing with evidence to convince the DOE that granting or restoring access authorization “will not endanger the common defense and security and will be clearly consistent with the national interest.” 10 C.F.R. § 710.27(d). The Individual is afforded a full opportunity to present evidence supporting his eligibility for an access authorization. The Part 710 regulations are drafted so as to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. *Id.* § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

The discussion below reflects my application of these factors to the testimony and exhibits presented by both sides in this case.

### IV. FINDINGS OF FACT

In November 2024, in connection with his application for a security clearance, the Individual provided responses to a Letter of Interrogatory (LOI) in which he admitted to all the criminal conduct listed in the Notification Letter that occurred from 1997 to 2019. Ex. 6 at 25–30. He wrote

that his current alcohol consumption was, on average, two or three times per week (socially) and two to six beers per time, “depending on the day and situation.” *Id.* at 33. He wrote that he sometimes consumed shots of liquor and that “the kind and amount vary.” *Id.* He wrote that this had been his pattern of alcohol consumption since May 20, 2020. *Id.* at 34. He further wrote that he had last consumed alcohol to the point of intoxication three days prior, when he consumed “a few beers and a couple of shots while out” and “a couple more beers and a shot of rum for a night cap” when he returned home. *Id.* In 2002, 2003, and 2020, the Individual attended DUI classes at the order of a court or judge. *Id.* at 36. On a separate occasion in 2002, the Individual attended some Alcoholics Anonymous (AA) meetings at the recommendation of his attorney as part of DUI defense. *Id.*; Ex. 7 at 47. In December 2024, the Individual self-referred to his employer’s Employee Assistance Program (EAP) for individual counseling and a guided alcohol education and support group. Ex. 7 at 47. As part of the EAP program, he attended individual counseling sessions and a weekly group focused on supporting alcohol abstinence. *Id.*; Ex. E at 6–8.

The Individual was referred to the Psychologist for an evaluation, which occurred in February 2025. Ex. 7 at 43. For the evaluation, the Psychologist administered several psychological inventories, interviewed the Individual, reviewed the Individual’s personnel security file, and spoke with the Individual’s EAP counselors. *Id.* at 43–44, 47, 49–50. The Individual also submitted to a PEth test which was positive at 60 ng/mL. *Id.* at 48. The Psychiatrist interpreted this result as evidence of binge consumption of alcohol and wrote that the Individual consumed alcohol “at least at the medium risk level.” *Id.* at 49. The Psychologist opined that the Individual warranted diagnosis with Unspecified Alcohol-Related Disorder, which applies to individuals who exhibit “symptoms characteristic of an alcohol-related disorder that cause clinically significant distress or impairment in social, occupational, or other important areas of functioning predominate but do not meet the full criteria for any specific alcohol-related disorder or any of the disorders in the substance-related and addictive disorders diagnostic class.” *Id.* at 50. *See also* Unspecified Alcohol-Related Disorder, *Diagnostic and Statistical Manual for Mental Disorders, Fifth Ed., Text Revision* 568 (2022). The Psychologist wrote, as support for his diagnosis, that the Individual denied problems with alcohol, persisted in consuming alcohol despite multiple DUI charges, drank more than intended, and binge drank. Ex. 7 at 50. He characterized the Individual as a binge drinker because he had “episodic higher than usual consumption” and cited to three occasions that the Individual had reported he had consumed more than five standard drinks. *Id.*

The Psychologist opined that the Individual was not rehabilitated or reformed. Ex. 7 at 50. He wrote that the Individual had only participated in supportive programs, not alcohol treatment, and that he had shown “little positive response to the DUI classes or to AA given his continued binge drinking and denial of problematic alcohol use.” *Id.* at 50–51. He recommended, to show evidence of rehabilitation, that the Individual:

- Enroll in and complete an intensive outpatient program (IOP) consisting of either:
  - At least nine hours of individual and group therapeutic and educational meetings weekly for at least twelve to sixteen weeks; or
  - A four- to six- week program with individual and group therapy components meeting four evenings per week;

- Consistently engage in weekly aftercare support for six months after IOP completion;
- Submit monthly negative PEth test results; and
- Maintain enrollment in the EAP programs and follow the recommendations of his EAP counselors.

*Id.* at 51. He recommended, to show evidence of reformation, that the Individual:

- Abstain from alcohol for twelve months; and
- Document his abstinence with monthly negative PEth test results.

*Id.*

The Individual completed the EAP alcohol awareness course in March 2025. Ex. D at 2. He completed the EAP abstinence support course in April 2025 but continued attending group sessions through January 2026. *Id.* at 1; Ex. E at 6–8. In April 2025, the Individual began attending an IOP, completing the program in July 2025.<sup>5</sup> Ex. A. About two weeks later, the Individual began attending AA weekly. Ex. B; *see also* Tr. at 47 (Individual testifying that he attended AA at least weekly). He submitted to monthly PEth tests from March 2025 through January 2026, each of which returned a negative result. Ex. F. The time period covered by those tests began in early February 2025. *See supra* n. 3.

Prior to the hearing, the Individual submitted into evidence the following exhibits not previously cited:

- A letter from the Individual’s AA sponsor stating that the Individual attended AA meetings regularly and appeared committed to making changes in his life. Ex. C.
- Affidavits, six in total, from family members, friends, and colleagues attesting to the Individual’s reliability, responsibility, helpfulness, and trustworthiness. Exs. G–L. All of the affidavits stated that, at the time of writing in October 2025, the Individual had not consumed alcohol in at least eight months. *Id.* One affidavit from a friend described the Individual’s AA participation and stated that he “completed numerous hours of coursework, regularly attends AA meetings, and currently works with a sponsor.” Ex. J.

At the hearing, the Individual’s EAP group facilitator testified that the Individual had developed a “recovery-oriented lifestyle” over the preceding year. Tr. at 12. She testified that he had grown and was also supportive of others in recovery. *Id.* She testified that she often heard “change talk” from the Individual and that the Individual had been very open in the groups. *Id.* at 13. The group facilitator testified that the Individual had learned tools to maintain his recovery and described him as a positive influence on her support groups. *Id.* at 14.

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<sup>5</sup> The IOP’s weekly programming consisted of one individual therapy session and nine to fifteen hours of group therapy. Ex. A.

The Individual's EAP counselor testified that she had seen the Individual for individual therapy about every six weeks from December 2024 through November 2025. Tr. at 20, 27. The length between the sessions was due to the limitation on how many EAP sessions were provided per year. *Id.* at 21. The counselor also testified that the Individual was doing well, so the long time between the sessions was not problematic. *Id.* The counselor testified that the Individual initially appeared to think of alcohol as a social activity, but eventually he started to realize how it impacted his health. *Id.* at 23. Over the course of his therapy sessions, she had observed the Individual move from the pre-contemplation stage to contemplation to preparation action to, finally, action of change. *Id.* at 29. She testified that she had seen him maintain the changes as well. *Id.* She further testified that a friend of the Individual's had died from alcohol-related causes recently and that this had made an impact on the Individual. *Id.* at 24. She described the Individual as engaged in his treatment. *Id.* She testified that the Individual had taken up new hobbies and was able to live a fulfilling social life without alcohol. *Id.* at 25. The counselor testified that the Individual's family was supportive of his recovery. *Id.* at 26. She testified that the Individual told her he intended to abstain indefinitely. *Id.* at 30.

The Individual's father testified that he and the Individual had regular contact and saw each other often. Tr. at 34. He testified that he had not seen the Individual consume alcohol since November 2024. *Id.* at 36. The Individual had told him he intended to abstain permanently. *Id.* at 40.

The Individual testified that he understood that his own actions, and his alcohol use in particular, had brought him to this situation. Tr. at 43. Through the EAP programming and his IOP, he was able to look at the underlying cause of his maladaptive relationship with alcohol. *Id.* at 44. He learned that his previous practice of calculating his BAC to know whether he could legally drive was not enough to ensure a safe relationship with alcohol. *Id.* Previously, when he had been in legal trouble because of alcohol, he would engage in court ordered education classes just to "get through it," but he now realized that he could not safely consume alcohol anymore. *Id.* at 47. The Individual testified, "I really do need to stay sober and not return to that lifestyle." *Id.* He realized he needed a program for support to stay sober. *Id.* at 48. He met often with his AA sponsor and was working the 12 Steps. *Id.* at 49. The Individual testified that he was working on the third step, which involved turning his life over to a higher power. *Id.* at 48. The Individual also continued to attend the EAP abstinence support class weekly and had a strong support system of family and friends on whom he could lean. *Id.* at 49, 55. The Individual testified that he used AA as an aftercare program because his IOP had not offered one. *Id.* at 56.

The Individual last consumed alcohol on January 15, 2025, after learning that continued consumption of alcohol could jeopardize his ability to obtain a security clearance. Tr. at 50, 51, 58. He testified that he realized alcohol was a problem in his life when he had to tell the Psychologist about his alcohol history. *Id.* at 51. He testified that he felt happier and had seen health improvements since starting to abstain from alcohol. *Id.* at 51, 54. Instead of drinking, the Individual played basketball, attended yoga classes, skied with his father, and volunteered with his motorcycle club. *Id.* at 51–52. He testified that he had been in situations where alcohol was served since beginning to abstain and that he would drink non-alcoholic beverages. *Id.* at 52. He testified that he was able to think more clearly in social situations, and his relationships had improved. *Id.* at 52–53. The Individual testified, "the risk is always going to [] be there, not only for dealing with

law enforcement, but also the health and relationship discrepancies are not going to be able to be mitigated unless I abstain completely and continue to abstain.” *Id.* at 47.

The Individual testified that he had never tried to give up drinking in the past, though he would, at times, take breaks from alcohol for health reasons. Tr. at 53. He testified that he did not resume drinking after those breaks for any particular reason, but rather because he did not have a reason not to resume drinking. *Id.* The Individual now preferred a sober lifestyle. *Id.* at 54. The Individual’s romantic partner used to drink in front of him, but he asked her not to, and she respected his wishes. *Id.* at 57. She started abstaining from alcohol about a month before the hearing. *Id.*

The Psychologist opined that as of the date of the hearing the Individual was rehabilitated. Tr. at 64. He based his opinion on the Individual’s completion of the IOP, AA attendance, PEth testing, and EAP group attendance. *Id.* at 63. He also cited the Individual’s experience of positive changes across several spectra in his life. *Id.* at 64– 65. He opined that the Individual showed insight into his alcohol use and recovery. *Id.* at 64. The Psychologist testified that the Individual’s participation in AA and the EAP abstinence support course showed commitment to aftercare. *Id.* at 63. He gave the Individual a very good prognosis. *Id.* at 64.

## V. ANALYSIS

A person who seeks access to classified information enters into a fiduciary relationship with the government predicated upon trust and confidence. This relationship transcends normal duty hours and endures throughout off-duty hours. The government places a high degree of trust and confidence in individuals to whom it grants access authorization. Decisions include, by necessity, consideration of the possible risk that the applicant may deliberately or inadvertently fail to protect or safeguard classified information. Such decisions entail a certain degree of legally permissible extrapolation as to potential, rather than actual, risk of compromise of classified information.

The issue before me is whether the Individual, at the time of the hearing, presents an unacceptable risk to national security and the common defense. I must consider all the evidence, both favorable and unfavorable, in a commonsense manner. “Any doubt concerning personnel being considered for access for national security eligibility will be resolved in favor of the national security.” Adjudicative Guidelines at ¶ 2(b). In reaching this decision, I have drawn only those conclusions that are reasonable, logical, and based on the evidence contained in the record. Because of the strong presumption against granting or restoring security clearances, I must deny access authorization if I am not convinced that the LSO’s security concerns have been mitigated such that granting the Individual’s clearance is not an unacceptable risk to national security.

Conditions that may mitigate Guideline G concerns include:

- (a) So much time has passed, or the behavior was so infrequent, or it happened under such unusual circumstances that it is unlikely to recur or does not cast doubt on the individual’s current reliability, trustworthiness, or judgment;

- (b) The individual acknowledges his or her pattern of maladaptive alcohol use, provides evidence of actions taken to overcome this problem, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations;
- (c) The individual is participating in counseling or a treatment program, has no previous history of treatment and relapse, and is making satisfactory progress in a treatment program; or
- (d) The individual has successfully completed a treatment program along with any required aftercare, and has demonstrated a clear and established pattern of modified consumption or abstinence in accordance with treatment recommendations.

Adjudicative Guidelines at ¶ 23. Mitigating conditions (b) and (d) apply.

Regarding mitigating condition (b), the Individual clearly identified the real harm to himself and others his alcohol consumption had caused and stated that he wanted to prevent further harm by continuing to abstain from alcohol. He approached recovery from multiple angles, attending an IOP, EAP classes, AA, and therapy. His efforts appear to have paid off: he has about one year of sobriety, documented through PEth testing, and multiple witnesses testified to the positive changes they have seen in the Individual since he stopped consuming alcohol. I find credible his testimony that he intends to abstain indefinitely. The Individual also completed the Psychologist's treatment recommendations. Based on the foregoing, I find that the Individual has acknowledged his pattern of maladaptive alcohol use, provided evidence of actions taken to overcome the problem, and demonstrated a clear and established pattern of abstinence in accordance with treatment recommendations. Mitigating condition (b) applies.

Regarding mitigating condition (d), the Individual successfully completed the IOP and the EAP alcohol awareness course. He continued attending AA and the EAP abstinence support course for six months afterward, which the Psychologist described as showing a commitment to aftercare, even though it was not an official aftercare program through the IOP. Therefore, I find that the Individual has successfully completed a treatment program along with any required aftercare. As stated above, I have found that the Individual has demonstrated a clear and established pattern of abstinence in accordance with treatment recommendations. Mitigating condition (d) applies.

For the foregoing reasons, I find that the Individual has mitigated the Guideline G security concerns.

## **VI. CONCLUSION**

Upon consideration of the entire record in this case, I find that there was evidence that raised concerns regarding the Individual's eligibility for access authorization under Guideline G of the Adjudicative Guidelines. I further find that the Individual has succeeded in fully resolving those concerns. Therefore, I conclude that granting DOE access authorization to the Individual "will not endanger the common defense and security and is clearly consistent with the national interest." 10 C.F.R. § 710.7(a). Accordingly, I find that the DOE should grant access authorization to the Individual.

This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Kristin L. Martin  
Administrative Judge  
Office of Hearings and Appeals