

CONCLUSION:

Upon review and consideration of all the evidence of record, and especially in light of the contents of enclosure (3), the Board finds the existence of an injustice warranting the following corrective action.

RECOMMENDATION:

- a. That Petitioner's naval record be corrected, where appropriate, to show the date of rank on his commission as a lieutenant, Dental Corps, U. S. Naval Reserve as 15 June 1996 vice 1 January 1998; and that his lineal precedence be adjusted accordingly.
- b. That any material or entries inconsistent with the Board's recommendation be corrected, removed or completely expunged from Petitioner's record and that no such entries or material be added to the record in the future.
- c. That a copy of this Report of Proceedings be filed at an appropriate location in Petitioner's naval record, and that another copy of this report be returned to this Board, together with any material directed to be removed from Petitioner's record, for retention in a confidential file maintained for such purpose.

4. Pursuant to Section 6(c) of the revised Procedures of the Board for Correction of Naval Records (32 Code of Federal Regulations, Section 723.6(c)) it is certified that a quorum was present at the Board's review and deliberations, and that the foregoing is a true and complete record of the Board's proceedings in the above entitled matter.

ROBERT D. ZSALMAN
Recorder


JONATHAN S. RUSKIN
Acting Recorder

5. Pursuant to the delegation of authority set out in Section 6(e) of the revised Procedures of the Board for Correction of Naval Records (32 Code of Federal Regulations, Section 723.6(e)) and having assured compliance with its provisions, it is hereby announced that the foregoing corrective action, taken under the authority of reference (a), has been approved by the Board on behalf of the Secretary of the Navy.


W. DEAN PFEIFFER
Executive Director

HD:hd
Docket No. 00780-01
27 March 2001

MEMORANDUM FOR THE RECORD

Subj: LT [REDACTED] DC, USNR, [REDACTED]

- 1. This memorandum for the record is to document conversation held this date between Lieutenant [REDACTED] and staff member.
- 2. The Lieutenant had requested that his date of rank be changed to January 1996 vice January 1998 not realizing that he was commissionin June 1999.
- 3. BUMED indicated in their advisory opinion that his date of rank should be 15 June 1996 and I called the Lieutenant to see if he agreed with that date and he indicated that he did, and that I could take the case the case to the Board as is.

[REDACTED]



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

750-01
IN REPLY REFER TO

1120
Ser 522/01-7827
08 Mar 01

From: Chief, Bureau of Medicine and Surgery
To: Board for Correction of Naval Records

Subj: ADVISORY OPINION ICO LT [REDACTED]

Ref: (a) SECNAVINST 1120.13a

Encl: (1) BCNR Application IC [REDACTED]
(2) Oath of Office IC [REDACTED] of 15 Jun 99
(3) NAVPERS 1210/5, page 1 [REDACTED]

1. Enclosure (1) is forwarded recommending the Date of Rank (DOR) for lieutenant be changed to 15 June 1996.
2. Per reference (a), Lieutenant [REDACTED] did not receive the correct Entry Grade Credit (EGC) of seven years. The oath of office, enclosure (2), reflects only five years, five months and fourteen days of entry grade credit. Entry grade credit is calculated as follows:
 - a. Dental School: 4 years
 - b. Experience as a practicing dentist as described in enclosure (3): 3 years (maximum allowed).
 - c. Total Entry Grade Credit awarded: 7 years.
3. The correct Date of Rank for lieutenant, using the entry grade as calculated above, is 15 June 1996.
4. Your point of contact is Comm [REDACTED], NC, USN, who may be reached [REDACTED]

[REDACTED]
By direction

BUPEHS USE ONLY

P1000-20

BUPEHS USE ONLY

OFFICER APPOINTMENT ACCEPTANCE AND OATH OF OFFICE

S-1

| | | | | | | | | | | | | |
|--|--|-----------------------|---|---------------------------------|--|--|--|---------------------------------|-------------------------------------|---|----------------|-------------|
| 1. NAME (LAST, FIRST, MIDDLE) [REDACTED] | | | | 2. STATUS BEFORE APPT. | | | | 3. PC 20 | | | | |
| ADDRESS [REDACTED] | | | | | | | | | | | | |
| HOME PHONE NO. [REDACTED] | | | | | | | | | | | | |
| COMM. NO. [REDACTED] | | | | | | | | | | | | |
| 4. SSN [REDACTED] | | 5. Y | | 6. DESIG. 2205 | | 7. S M | | 8. | | 9. OSC 150 | 10. CSC 150 | 11. BC C |
| 12. DATE OF BIRTH 52SEP15 | | 13. PERM. GRADE LT | | 14. PERM. GRADE DATE 98JAN01 | | 15. PRES. GRADE LT | | 16. PRES. GRADE DATE 98JAN01 | | 17. NULL & VOID DATE | | |
| 18. TYPE OF DUTY <input type="checkbox"/> ACTIVE <input checked="" type="checkbox"/> INACTIVE | | | 19. TYPE OF APPOINTMENT <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> PERMANENT | | | 20. STATUS <input type="checkbox"/> CONFIRMED <input type="checkbox"/> AD INTERIM | | | 21. USN <input type="checkbox"/> | 22. USNR <input checked="" type="checkbox"/> | | |
| 23. AUTHORITY 10 USC 12203 | | | | 24. 99A | | 25. PLSD | | 26. B | 27. BUPEHS USE ONLY | | | |

THE PRESIDENT OF THE UNITED STATES HAS APPOINTED [REDACTED] OFFICER IN THE U.S. NAVY UNDER THE CONDITIONS INDICATED IN THIS DOCUMENT. IF A [REDACTED] MUST COMPLETE OATH OF OFFICE. IF IT IS NOT ACCEPTED SIGN AND DATE OF ACCEPTANCE:

AUTHENTICATED: [REDACTED]

9 JUN 1999

OATH OF OFFICE

From: [REDACTED] TEMPERLY
To: Secretary of the Navy

I [REDACTED] TEMPERLY
HAVING BEEN APPOINTED [REDACTED] LT (P)
IN THE U.S. NAVY UNDER THE CONDITIONS INDICATED IN THIS DOCUMENT, DO ACCEPT SUCH APPOINTMENT AND DO SOLEMNLY SWEAR (OR AFFIRM) THAT I WILL SUPPORT AND DEFEND THE CONSTITUTION OF THE UNITED STATES AGAINST ALL ENEMIES, FOREIGN AND DOMESTIC, THAT I WILL BEAR TRUE FAITH AND ALLEGIANCE TO THE SAME; THAT I TAKE THIS OBLIGATION FREELY, WITHOUT ANY MENTAL RESERVATION OR PURPOSE OF EVASION; AND THAT I WILL WELL AND FAITHFULLY DISCHARGE THE DUTIES OF THE OFFICE ON WHICH I AM ABOUT TO ENTER, SO HELP ME GOD.

Copy to:
BUMED 52/DC

[REDACTED]
(SIGNATURE OF APPOINTEE)

SUBSCRIBED AND SWORN TO BEFORE ME THIS

15th day of June 19 99

[REDACTED] DR, USN (Ret)
(SIGNATURE AND GRADE OF WITNESSING OFFICER)

DECLINATION OR DISQUALIFICATION

- NOT OFFERED
- NOT ACCEPTED

(APPOINTEE/COMMANDING OFFICER SIGNATURE) (DATE)

REASON

OFFICER-QUALIFICATIONS QUESTIONNAIRE
NAVPERS 1210/5 (Rev. 9-75)
S/N 0106-LF-012-1025

PRIVACY ACT STATEMENT: Authority to request this information is derived from 5 United States Code 301, Departmental Regulations. Purpose of this form is to obtain basic information concerning an officer's skills and experience either from civilian occupation or enlisted status. Information is recorded in automated master files and used by assignment officers and by other officials and employees of the Department of the Navy in the management, supervision, and administration of Navy Personnel. Form is normally completed at the time of initial appointment to officer status. Completion of the form is mandatory. Failure to provide the required information may result in administrative action being taken.

NAME (Last, first, middle): [REDACTED] GRADE: LT DESIGNATOR: 2205

MARITAL STATUS: SINGLE MARRIED NUMBER OF DEPENDENTS: 0 DATE OF BIRTH: 15 SEP 52 TYPE OF DUTY TO WHICH ORDERED: ACTIVE INACTIVE

SOURCE OF COMMISSION:

NAV. ACAD. NROTC DIRECT APPT. (ONOP) OCS MERCHANT MARINE NACP RESERVE INTEGRATION PROGRAM "L" CATEGORY

NAV. CAD. AOC FROM ENLISTED ROC OTHER (Specify source)

LICENSES: (Bar admission, CPA, physician, master, malt, etc. Indicate date and State if applicable.) [REDACTED] List any special skills you have acquired through studies or hobbies other than those developed in your regular employment.

Indicate proficiency in (C) Listening Comprehension, (R) Reading Comprehension, (S) Speaking and (W) Writing by using the appropriate level codes below:

| CODE | LEVEL | CODE | LEVEL |
|------|--------------------------|------|----------------------|
| 0 | No practical proficiency | 3 | Minimum Professional |
| 1 | Elementary | 4 | Full Professional |
| 2 | Limited Working | 5 | Native/Bilingual |

| FOREIGN LANGUAGE ABILITY | | CODE | | | |
|--------------------------|--------------|------|---|---|---|
| LANGUAGE/DIALECT | HOW ACQUIRED | C | R | S | W |
| SPANISH | | 3 | 3 | 3 | 3 |

FOREIGN RESIDENCE AND TRAVEL: List any foreign countries or areas with which you are thoroughly familiar by reason of travel or residence. (Indicate dates.)

EDUCATION: HIGH SCHOOL GRADUATE YES NO GED TESTS: MS COLLEGE LEVEL 2CX

| COLLEGE, UNIVERSITY, PROFESSIONAL OR TECHNICAL SCHOOL (Name and Location) | DATES OF ATTENDANCE (From-To) | SEMESTER HOURS COMPLETED | TITLE OF DEGREE | DATE OF DEGREE | MAJOR FIELD OF STUDY | SPECIALIZATION WITHIN MAJOR |
|---|-------------------------------|--------------------------|-----------------|----------------|----------------------|-----------------------------|
| SW TX ST U, SAN MARCOS, TX | 9/70-7/74 | | BS | MAY 74 | BIOLOGY | |
| SW TX ST U, SAN MARCOS, TX | 9/74-5/75 | | | | | |
| U OF TX HEALTH SCIENCE CENTER | 7/75-6/79 | | DDS | JUN 75 | DENTISTRY | |

CIVILIAN EMPLOYMENT: Start with your last position and work back. Describe your field of work and position so as to make your qualifications clear.

PLACE (City and State): [REDACTED] EXACT TITLE OF YOUR POSITION: DENTIST

FROM (Month, Year): 9/79 TO (Month, Year): 6/99 DUTIES AND RESPONSIBILITIES: GENERAL DENTISTRY

NAME OF EMPLOYER: [REDACTED]

KIND OF BUSINESS (Public Utility, etc.): PUBLIC

NUMBER OF EMPLOYEES YOU SUPERVISED: 1

PLACE (City and State): [REDACTED] EXACT TITLE OF YOUR POSITION: DIRECTOR DENTAL SERVICES

FROM (Month, Year): 3/97 TO (Month, Year): 4/98 DUTIES AND RESPONSIBILITIES: [REDACTED]

NAME OF EMPLOYER: [REDACTED]

KIND OF BUSINESS (Public Utility, etc.): PUBLIC

NUMBER OF EMPLOYEES YOU SUPERVISED: 2