*The original of this document contains information which is subject to withholding from disclosure under 5 U.S. C. § 552. Such material has been deleted from this copy and replaced with XXXXXX's.

United States Department of Energy Office of Hearings and Appeals

Filing Date: May 13, 2024	In the Matter of:	Personnel Security Hearing
	Filing Date:	May 13, 2024

Case No.:

PSH-24-0122

Issued: October 4, 2024

Administrative Judge Decision

Steven L. Fine, Administrative Judge:

This Decision concerns the eligibility of XXXXXXXXXX (hereinafter referred to as "the Individual") to hold an 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."¹ The Individual has a history of three alcohol-related arrests and three alcohol-related probation violations. A DOE-contracted psychiatrist (Psychiatrist), applying the criteria set forth in the *Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition, Text Revision* (DSM-5-TR), evaluated the Individual and diagnosed her with Alcohol Use Disorder (AUD), Mild. This decision considers whether the Individual has resolved the security concerns raised by her alcohol-related arrests, alcohol-related probation violations, and AUD. As discussed below, after carefully considering the record before me in light of the relevant regulations and the *National Security Adjudicative Guidelines for Determining Eligibility for Access to Classified Information or Eligibility to Hold a Sensitive Position* (June 8, 2017) (Adjudicative Guidelines), I conclude that the Individual's access authorization should not be restored.

I. Background

On November 19, 2023, the Individual was arrested and charged with Driving Under the Influence (DUI). Exhibit (Ex.) 6 at 25.² The Individual had previously been arrested for Driving While Intoxicated (DWI), on June 1, 2019, and for Assault/Attempted Battery on October 5, 2007. Ex. 1 at 5; Ex. 11 at 118, 131. During her probation for her 2019 DWI, the Individual was charged with three alcohol-related probation violations. Ex. 7 at 29; Ex. 8 at 38, 41–42. The first violation occurred on October 4, 2020, after her interlock device detected alcohol. Ex. 8 at 38, 41–42. The Individual first claimed this detection occurred because of hand sanitizer on her son's hand when

¹ 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.

 $^{^{2}}$ The exhibits submitted by the DOE were Bates numbered in the upper right corner of each page. This Decision will refer to the Bates numbering when citing to exhibits submitted by the DOE.

he blew into the interlock to start the car. Ex. 8 at 41–42. She subsequently claimed that this detection occurred when she blew into the interlock device after using hand sanitizer. Hearing Transcript, OHA Case No. PSH-24-0122 (Tr.) at 24. The second violation occurred on October 5, 2020, when the Individual was ordered to appear for "immediate [alcohol] testing" at 8:11 a.m. but did not appear for testing until 4:34 p.m. that day because she "had to go to work." Ex. 8 at 41–42. The third violation also occurred on October 5, 2020, when, after finally appearing for alcohol testing, the Individual provided a diluted urine sample. Ex. 8 at 38, 42; Ex. 3 at 14; Ex. 7 at 29. The Individual was fined because of these probation violations. Ex. 8 at 42.

A. Letter of Interrogatory

On January 2, 2024, the Individual responded to a Letter of Interrogatory (LOI) issued to her by the Local Security Office (LSO), seeking additional information about her arrests and alcohol use. Ex. 7 at 26–35. In her response, the Individual confirmed that she had been arrested for DWI in 2019 and had been sentenced to three months of supervised probation, nine months of unsupervised probation, and community service.³ Ex. 7 at 29. The Individual's LOI response omitted the fact that she had been required to install an alcohol detection interlock device after her 2019 DWI arrest. Ex. 8 at 41. The Individual's LOI response also claimed that her last use of alcohol occurred on November 19, 2023. Ex. 7 at 30–31. Question 16 of the LOI asked the Individual: "DOE is in possession of information that . . . [a] Police Department charged you with Simple Assault/ Assault Attempted Battery on October 5, 2007. Is this correct?" Ex. 7 at 29. The Individual: "Did you consume any alcohol prior to this arrest?" Ex. 7 at 30. The Individual responded by stating "Yes." Ex. 7 at 30.

B. Psychiatric Evaluation

At the LSO's request, the Psychiatrist conducted a psychiatric evaluation of the Individual, which included a clinical interview (CI) of the Individual on February 21, 2024. Ex. 8 at 37. In addition to conducting the CI, the Psychiatrist also reviewed the Individual's personnel security file and had her undergo a Phosphatidylethanol (PEth) laboratory test to detect alcohol consumption.⁴ Ex. 8 at 39, 45. The Individual's PEth test was negative, which the Psychiatrist opined was consistent with her self-report that she abstained from alcohol consumption during the month before the evaluation. Ex. 8 at 45, 49. During the CI, the Individual admitted consuming alcohol before her 2023 and 2019 arrests; however, she denied consuming alcohol prior to her October 2007 arrest for Assault/Attempted Battery. Ex. 8 at 40. The Individual also admitted that she was required to install an interlock ignition device on her vehicle after the 2019 DWI.⁵ Ex. 8 at 41. The Individual opined that she did not have a problem with alcohol and had not sought alcohol treatment. Ex. 8

³ The Individual also reported that after her June 2019 arrest for DWI, she completed "DUI courses" as part of her probation but did not specify the type of "DUI courses" she completed. Ex. 7 at 29.

⁴ The Psychiatrist's report indicates that PEth can be detected in blood for "about 28 days after alcohol consumption has ceased." Ex. 8 at 45.

⁵ The Individual reported that after her November 2023 DUI arrest, she saw an Employee Assistance Program counselor (EAP Counselor) at her supervisor's request. Ex. 8 at 43. She stated that she had two meetings with the EAP Counselor, who was not concerned about her drinking and did not recommend any alcohol treatment. Ex. 8 at 43.

at 43. However, she claimed that she had not consumed alcohol since her November 2023 arrest. Ex. 8 at 43. She described herself as "OK with not drinking at this point," and indicated that "way further down the line," she may consider having "a couple of beers [with] girlfriends every week." Ex. 8 at 43. However, she claimed that she would be careful to not drink and drive. Ex. 8 at 43.

On February 28, 2024, the Psychiatrist issued a report (the Report), in which he found that the Individual met sufficient DSM-5-TR criteria for a diagnosis of AUD, Mild, in Early Remission. Ex. 8 at 38, 45. Noting that the Individual "maintains that she does not have an [AUD] or a problem with alcohol," and had never received treatment for AUD, the Psychiatrist concluded that the Individual had not been rehabilitated or reformed from her AUD, Mild. Ex. 8 at 45, 47. The Psychiatrist opined that the Individual could demonstrate rehabilitation or reformation from her AUD by: enrolling in "a treatment regimen of 'moderate intensity,' such as Alcoholics Anonymous or SMART (Self-Management and Recovery Training) at least once per week or treatment with a licensed substance abuse counselor." Ex. 8 at 47. The Psychiatrist also recommended that the Individual abstain from alcohol use for one year. Ex. 8 at 47.

C. Present Administrative Review Proceeding

The LSO issued a Notification Letter to the Individual informing her that it received derogatory information creating substantial doubt regarding her eligibility to hold a security clearance. The Notification Letter further informed the Individual that she was entitled to a hearing before an Administrative Judge to resolve the security concerns. *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), I took testimony from the Individual and the Psychiatrist. The DOE Counsel submitted eleven exhibits, marked as Exhibits 1 through 11. The Individual submitted the ten exhibits, marked as Exhibits A through J:

Exhibits A through E consist of five laboratory reports, dated April 25, 2024, April 29, 2024, June 6, 2024, July 3, 2024, and July 16, 2024. Exs. A–E. Each report indicates the Individual's urine tested negative for alcohol and illegal drug use. Exs. A–E.

Exhibits F through I consist of four laboratory reports, dated January 18, 2024, January 25, 2024, February 28, 2024, and June 18, 2024. Exs. F–I. Each report indicates the Individual's urine tested negative for drug use. Exs. F–I. However, none of these reports indicate that the Individual's urine was tested for alcohol. Exs. F–I. Exhibit G, the laboratory report of the results of the urine specimen collected on January 25, 2024, is marked as a "Dilute Specimen" although the test results were reported as "Negative." Ex. G at 1.

Exhibit J consists of two laboratory reports, dated September 11, 2024, and September 19, 2024. Ex. J. Both reports indicate the Individual's urine tested negative for alcohol. Ex. J.

II. The Summary of Security Concerns (SSC)

The SSC attached to the Notification Letter informed the Individual that information in the possession of the DOE created substantial doubt concerning her eligibility for a security clearance

under Guidelines G (Alcohol Consumption) and J (Criminal Conduct) of the Adjudicative Guidelines.

A. Guideline G

Under Guideline G, the LSO cited the Psychiatrist's opinion that the Individual met sufficient DSM-5-TR criteria for a diagnosis of AUD, Mild, in Early Remission,⁶ as well as the Individual's three alcohol-related arrests and three alcohol-related parole violations. This information adequately justifies the LSO's invocation of Guideline G. Under Guideline G, "[e]xcessive 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 \P 21. Among those conditions set forth in the Adjudicative Guidelines that could raise a disqualifying security concern are "alcohol-related incidents away from work . . ." and "diagnosis by a duly qualified medical or mental health professional (e.g. . . . Psychiatrist . . .) of alcohol use disorder." Adjudicative Guidelines at \P 22(a), (d).

B. Guideline J

Under Guideline J, the LSO cited the Individual's history of three arrests and three probation violations. This information adequately justifies the LSO's invocation of Guideline J. Guideline J states that "[c]riminal activity creates doubt about a person's judgment, reliability, and trustworthiness" and that, "[b]y its very nature, it calls into question a person's ability or willingness to comply with laws, rules, and regulations." Adjudicative Guidelines at \P 30. Conditions that could raise a security concern under Guideline J include "[e]vidence . . . of criminal conduct, regardless of whether the individual was formally charged, prosecuted, or convicted[.]" Adjudicative Guidelines at \P 31(b).

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 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

⁶ The SSC indicates the Individual was diagnosed with "Alcohol Abuse Disorder," but this appears to be a typographical error, as the Psychiatrist's Report indicates he diagnosed the Individual with AUD. Ex. 1 at 5; Ex. 8 at 45.

710 regulations are drafted to permit the introduction of a very broad range of evidence at personnel security hearings. Even appropriate hearsay evidence may be admitted. 10 C.F.R. § 710.26(h). Hence, an individual is afforded the utmost latitude in the presentation of evidence to mitigate the security concerns at issue.

IV. Hearing Testimony

The Individual testified that she last consumed alcohol on November 19, 2023. Tr. at 11. She explained that while she was awaiting trial for her 2023 DUI, she was required to undergo random drug and alcohol testing twice per month, abstain from drugs and alcohol, have an interlock ignition device installed in her vehicle, and complete community service. Tr. at 11–12, 19–20. She stated that since November 2023, she has undergone approximately 17 tests for alcohol, including one test taken the day of the hearing, and the results of all her tests have been negative for alcohol consumption.⁷ Tr. at 12. The Individual admitted that she has not participated in any alcohol counseling or treatment. Tr. at 13–14. She acknowledged reading the Psychiatrist's Report and his recommendation that she engage in some form of alcohol treatment, however, she contended that she has been too busy moving and relocating her family to enter treatment. Tr. at 14–15, 45–46. In March or April 2024, the Individual attended counseling with the EAP Counselor, but the sessions were related to her mental health, not her alcohol consumption. Tr. at 15-16. Regarding her alcohol testing, the Individual acknowledged that her January 25, 2024, urine test indicates her urine sample was diluted. Tr. at 21; Ex. G. She explained that she drinks water throughout the day, except in the morning, when she consumes energy drinks. Tr. at 22. She subsequently decided to take her tests first thing in the morning, so she has a better chance of her urine "not looking so clear." Tr. At 21–22.

The Individual testified that after her 2019 DWI arrest, she was able to initially abstain from alcohol for a few months before resuming her alcohol use around the holiday season. Tr. at 45. The Individual claimed that her first probation violation occurred on October 4, 2020, when she put hand sanitizer on her hands before using the interlock ignition device which triggered the device.⁸ Tr. at 24. She claimed that this violation occurred outside of her probation officer's office, so she immediately took a urine test, which, she further claimed, was negative for alcohol consumption. Tr. at 24-25. Concerning her second probation violation, which occurred on October 5, 2020, she claimed she was unable to report for a urine test in a timely manner because she had to work. Tr. at 25. She admitted that her third probation violation occurred when her October 5, 2023, urine specimen was found to be diluted. Tr. at 27. She denied altering that sample. Tr. at 27. She stated she was "observed" while she provided her urine sample, and she did not add anything to the sample. Tr. at 27. The Individual claimed that her October 2007 Assault/Battery arrest occurred when she defended her son from her then-partner. Tr. at 28. She testified that she was arrested because she "left a mark" on her then-partner as a result of the altercation. Tr. at 28. As a result of this incident, she was required to complete one year of anger management classes and was placed on probation for one year. Tr. at 28. She claimed she had not consumed alcohol prior to that incident and that she erroneously reported consuming alcohol before the October 2007

⁷ While the Individual claimed she had taken seventeen alcohol tests, she only submitted seven alcohol test results.

⁸ During the CI, the Individual told the Psychiatrist that her first probation violation occurred because her **son** had hand sanitizer on **his** hands when **he** blew into the Interlock Device. Ex. 8 at 41–42.

arrest in her LOI response because she was "confused." Tr. at 28, 30. The Individual further testified that although the Psychiatrist diagnosed her with AUD, Mild, she does not believe she has a problem with alcohol. Tr. at 28, 39–40. She testified that she has not had any cravings for alcohol during the past ten months and that she intends to permanently abstain from alcohol use. Tr. at 32, 42.

After observing the Individual's testimony, the Psychiatrist opined that the Individual has not shown adequate evidence of rehabilitation or reformation from her AUD, Mild. Tr. at 49-50. He further opined that the Individual is "off to a good start" but expressed his concern that her diluted urine samples provided "a little reason to suspect" that she has not abstained from alcohol use. Tr. at 51. The Psychiatrist also found the variations in the Individual's creatinine levels among her alcohol tests to be suspicious. Tr. at 62–70. He stated the results of the Individual's July 3, 2024, test shows that her level of creatinine, a "chemical in the body that's excreted normally into the urine," was 29.7, which was "just barely above the dilution threshold of 20," and considerably lower than her creatinine levels shown on other tests, which ranged from 107 to 221. Tr. at 59, 64, 70; Ex. C. Because the Individual previously violated her probation by turning in a diluted urine specimen, the Psychiatrist doubted the reliability of her July 3, 2024, test result.⁹ Tr. at 65–67. He also opined the Individual still does not believe she has AUD, or an alcohol problem, and that her stated reasons for not seeking treatment, that she has "a lot going on," is not "a good enough reason" to forego treatment. Tr. at 55-56. He opined the Individual needs to enter alcohol treatment to resolve her AUD. Tr. at 57. He also opined that the Individual's risk of relapse is high. Tr. at 73. He further opined that, although she has made good progress during the past ten months, the requirement that she abstain from alcohol as a term of probation is "very strong external motivation," and he is concerned that she may resume drinking if she no longer has "external sanctions" to keep her on the right track. Tr. at 73.

V. Analysis

A. Guideline G

The Individual has a significant history of alcohol-related misconduct that led to an evaluation by the Psychiatrist, who diagnosed her with AUD, Mild, recommended that she receive treatment for her AUD, and recommended that she abstain from alcohol use for at least one year. The Record unambiguously shows that the Individual did not receive any treatment for her AUD. The Individual, however, claims that she has abstained from alcohol use for almost ten months and that she now intends to permanently abstain from alcohol use, despite her repeatedly stated belief that she does not have an alcohol problem. As an initial matter, I find that a ten-month period of alleged abstinence is not adequate to mitigate the security concerns raised by the Individual's AUD and alcohol-related misconduct. First, the alleged period of abstinence is two months shorter than the Psychiatrist's recommendation. Second, the Individual does not consider herself to have an alcohol problem and has not engaged in any treatment for her AUD. Moreover, the Individual has not convinced me that she had, in fact, abstained from alcohol use for almost ten months. The only evidence she submitted in support of this claim is her self-serving testimony and seven urine

⁹ The Psychiatrist explained that when testing urine for the presence of alcohol, a person can dilute their urine so much that the chemicals being tested for, including ethanol, will also get diluted, and you can "sneak by with a negative" result. Tr. at 60. One way to dilute urine is to "drink a huge amount of water" before the test, and "sometimes that will be just enough to slip you under the detection threshold." Tr. at 60–61.

screening test results. Those urine test results present little support for her contention that she abstained from alcohol use for the past ten months. As discussed above, two of those samples may have been diluted. Finally, I note that the Individual's less than credible explanations of her probation violations and her claim that she was confused when she reported using alcohol prior to her 2007 arrest in her responses to the LOI have led me to question her credibility, which I would have to rely upon to conclude she has abstained from alcohol use for the past ten months. I therefore find that the Individual has not recovered from her AUD, Mild, and that she has not therefore mitigated the security concerns arising from her three alcohol-related arrest and three alcohol-related probation violations.

The Adjudicative Guidelines set forth four conditions that may mitigate security concerns under Guideline G. None of the four conditions are present in the instant case.

Paragraph 23(a) provides that security concerns raised under Guideline G may be mitigated when an individual has shown that "[s]o 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." Adjudicative Guidelines at \P 23(a). The Individual's problematic alcohol use has been frequent and has not been an unusual occurrence. Furthermore, I have found that the Individual is neither reformed nor rehabilitated from her AUD, which continues to cast doubt upon her reliability, trustworthiness, and judgment. Accordingly, the first mitigating factor is not present in the instant case.

Paragraph 23(b) provides that security concerns raised under Guideline G may be mitigated when an individual acknowledges their "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." Adjudicative Guidelines at ¶ 23(b). In the present case, the Individual does not acknowledge that she has a problem with alcohol. Nor has the Individual taken the recommended step of receiving treatment or counseling for her AUD, Mild. For the reasons I have discussed above, I am not convinced that the Individual has demonstrated a clear and established pattern of abstinence, as recommended by the Psychiatrist. Accordingly, the second mitigating factor is not present in this case.

Paragraph 23(c) provides that security concerns raised under Guideline G may be mitigated when 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." Adjudicative Guidelines at ¶ 23(c). As explained above, the Individual has not followed the Psychiatrist's recommendation to enroll in an alcohol treatment or counseling program to treat her AUD, Mild. Accordingly, the third mitigating factor is not present in this case.

Paragraph 23(d) provides that security concerns raised under Guideline G may be mitigated when 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 \P 23(d). As explained above, the Individual has not followed the Psychiatrist's recommendation to enroll in an alcohol treatment program. Accordingly, the fourth mitigating factor is not present in this case. I therefore find that the Individual has not sufficiently established the presence of any of the four mitigating conditions set forth at Guideline G. Accordingly, I find that she has not resolved the security concerns raised under Guideline G.

B. Guideline J

The Individual's pattern of criminal activity was clearly symptomatic of her AUD. Because the Individual has not shown that she has been rehabilitated or reformed from her AUD, I am not convinced that the risk that the Individual will engage in future criminal activity has been mitigated. Moreover, the Individual's lack of candor during the present proceeding suggests the Individual's judgment, reliability, honesty, and trustworthiness remain currently impaired.

The Adjudicative Guidelines set forth four conditions that can mitigate security concerns under Guideline J. None of these four conditions are present in the instant case.

Paragraph 32(a) provides that security concerns raised under Guideline J can be mitigated when the individual has shown that "[s]o much time has elapsed since the criminal behavior happened, or it happened under such unusual circumstances, that it is unlikely to recur and does not cast doubt on the individual's reliability, trustworthiness, or good judgment." Adjudicative Guidelines at \P 32(a). In the present case, the Individual's pattern of criminal activity has continued as recently as ten months before the hearing. Accordingly, I find that not enough time has passed to resolve the security concerns arising from that pattern. Moreover, the Individual's pattern of criminal behavior is a symptom of her AUD, Mild, and she has not taken sufficient action to treat that disorder. The Individual has not presented evidence to establish that her criminal behavior, including driving after consuming alcohol to intoxication and violating the terms of her probation, occurred under unusual circumstances. I therefore find that the Individual has not shown her criminal behavior is unlikely to recur and that her behavior continues to cast doubt on her reliability, trustworthiness, honesty, and good judgment. Accordingly, the first mitigating factor is not present in the instant case.

Paragraph 32(b) provides that security concerns raised under Guideline J can be mitigated when the individual has shown that "[t]he individual was pressured or coerced into committing the act and those pressures are no longer present in the person's life." Adjudicative Guidelines at \P 32(b). In the present case, the Individual did not allege that she was pressured or coerced into committing any of the criminal conduct discussed in this case. Accordingly, the second mitigating factor is not present in this case.

Paragraph 32(c) provides that security concerns raised under Guideline J can be mitigated when the individual has shown that there is no "reliable evidence to support that the individual committed the offense." Adjudicative Guidelines at \P 32(c). In the present case, the Individual did not allege that the information concerning her three arrests, and three probation violations were from less than reliable sources. Accordingly, the third mitigating factor is not present in this case.

Paragraph 32(d) provides that that security concerns raised under Guideline J can be mitigated when the individual has shown that there "is evidence of successful rehabilitation, including, but not limited to, the passage of time without recurrence of criminal activity, restitution, compliance with the terms of parole or probation, job training or higher education, good employment record,

or constructive community involvement." Adjudicative Guidelines at ¶ 32(d). In the present case, the Individual has not sought treatment for her AUD, Mild, which is the root cause of her criminal arrests and her probation violations. Although the Individual has not been arrested in the ten months since her November 2023 DUI, she has not resolved her AUD, so I am unable to conclude that her criminal behavior is not likely to recur, or that she is not likely to violate the terms of the probation she is currently serving related to her November 2023 arrest. Accordingly, the fourth mitigating factor is not present in the instant case.

I therefore find that the Individual has not sufficiently established the presence of any of the four mitigating conditions set forth at Guideline J for her two most recent arrests and her three parole violations. Accordingly, I find that she has not resolved the security concerns raised under Guideline J by her two most recent arrests and her three parole violations.

VI. Conclusion

For the reasons set forth above, I conclude that the LSO properly invoked Guidelines G and J of the Adjudicative Guidelines. After considering all the evidence, both favorable and unfavorable, in a commonsense manner, I find that the Individual has not mitigated all of the security concerns raised under either Guideline. Accordingly, the Individual has not demonstrated that restoring her security clearance would not endanger the common defense and would be clearly consistent with the national interest. Therefore, the Individual's security clearance should not be restored. This Decision may be appealed in accordance with the procedures set forth at 10 C.F.R. § 710.28.

Steven L. Fine Administrative Judge Office of Hearings and Appeals