



**Bexar County Sheriff's Office**  
**Javier Salazar, Sheriff**



**AGREED ORDER OF SUSPENSION**

**EMPLOYEE: Deputy Jacqueline Tellez #4232, Third Detail, Detention,**

**DATE: July 20, 2018**

You are hereby notified the Bexar County Sheriffs' Office is suspending you without pay for a total of Three (3) days from the position of Detention Deputy for the following violations of Chapter IX, Section 9.02 of the Rules of the Bexar County Sheriffs Civil Service Commission:

**F. Misuse of Leave Privileges.**

In addition to the following violations of the Bexar County Sheriff's Office Manual of Policy and Procedure:

**30.08 (B1, 2) Restriction on Outside Employment.**

**The specific reason(s) for this action:** An investigation revealed you have worked a part time job despite having called in sick, constituting a violation of policy.

**The corrective action required:** In the future, you will not engage in part time work in violation of policy. Specifically you will comply with Section 30.08 (B2) Outside Employment of the Sheriff's Policy Manual which states in part "The employee, after having been out on sick or injury leave, shall complete one (1) regular tour of duty before engaging in any outside employment." Be advised that repetition of the action which resulted in this Order of Suspension, may result in more serious disciplinary action, which may include dismissal from the Sheriff's Office.

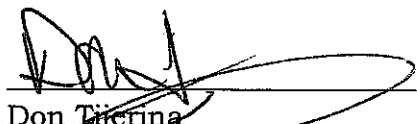
A grievance hearing was held in my office.

**Present at the hearing were the following:**

Don Tijerina, Chief Deputy  
Laura Martinez, HR Technician  
Deputy Crystal Flynn, Sheriff's Administration  
Deputy Jacqueline Tellez, Grievant

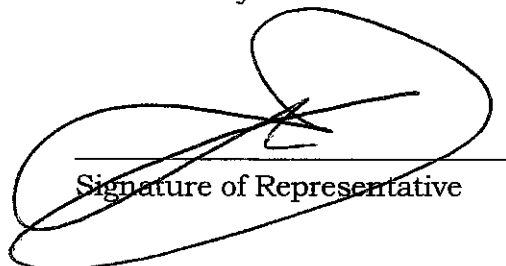
I offered a reduction and you have accepted an Agreed Order of Suspension of Three (3) days, therefore, I am issuing this Agreed Order of Suspension. Be advised that by agreeing to this reduced action you are also agreeing to waive further grievance and appeals procedures regarding this issue.


**I have read the above. I fully understand my rights of grievance and appeal in disciplinary issues as outlined under Civil Service Rules. I wish to waive further grievance and appeal procedures regarding this issue and agree to accept the Reduced Action as outlined above.**

  
Don Tijerina  
Chief Deputy

The foregoing document was served to Deputy Jacqueline Tellez on July 23 2018. Please acknowledge receipt of said document and return by fax to Sheriff's HR Office at (210)335-5083.

**Agreed and Accepted:**

  
Signature of Representative

  
7-23-18

Dist. 1) Original – Personnel File 2) Shift Commander 3) HR Technician 4) Employee



# Bexar County Sheriff's Office

Javier Salazar, Sheriff



## ENACTMENT OF SUSPENSION

**TO: Deputy Jacqueline Tellez, #4232, Detention**

**DATE: July 20, 2018**

***This is a reduced action ordered by Deputy Chief Deputy Don. You have consented to this reduced action and agreed to waive further grievance and appeal procedures.***

You have accepted an Agreed Order of Suspension for three (3) days.

Please be advised, pursuant to Civil Service Rule 5.53, you may opt to forfeit leave up to a total of five (5) days in one calendar year.

Accordingly, the Order of Suspension is being enacted on the following days:

<u>AUGUST 23-24-25</u>		<u>2018</u>
Month	Day (s)	Year

#4051  
lt Juan L. Miranda  
Server's Signature

[Signature]  
Employee's Signature

07/30/18  
Date



**Bexar County Sheriff's Office**  
**Javier Salazar, Sheriff**



**REQUEST TO FORFEIT LEAVE IN LIEU OF SUSPENSION**

EMPLOYEE: **Deputy Jacqueline Tellez #4232, Third Detail, Detention**  
DATE: **July 20, 2018**

Bexar County Civil Service Rule 5.53 states that an employee may forfeit up to a total of five days Annual or Compensatory time per calendar year. Pursuant to the aforementioned rule, I, Deputy Jacqueline Tellez, am requesting that \_\_\_\_ day(s) of my accumulated leave be applied towards my three (3) day suspension.

**I understand the application of my leave toward the Order of Suspension is voluntary on my part and I will be required to work on the dates I choose to forfeit. I further understand and agree that in choosing to use this option, I will be forfeiting and waiving my right to appeal this suspension to the Civil Service Commission.**

Please designate which SPECIFIC type of leave you wish to forfeit your leave from:

Month	day(s)	2018	hrs @ 8.0 hrs each day	VAC	COMP	HOL
		year				

The Foregoing Document was served upon **Deputy Jacqueline Tellez** on July 30 2018 by:

**#4057**  
**G. HELEN L. MEDRANO**  
Printed Name/Badge of Server

**#4057**  
**G. Helen L. Medrano**  
Signature of Server

Agreed and Accepted by Employee:

\_\_\_\_\_  
**Signature of Employee**