Contra Costa County

Print Form

Please return completed applications to:
Clerk of the Board of Supervisors
1025 Escobar Street, 1st Floor
Martinez, CA 94553
or email to: ClerkofTheBoard@cob.cccounty.us

BOARDS, COMMITTEES, AND COMMISSIONS APPLICATION

First Name Lorna
Middle Initial M
Last Name Van Ackeren

Home Address - Street
City
State
Postal Code

Primary Phone (best number to reach you)
Email Address

Resident of Supervisorial District (if out of County, please enter N/A):
District Locator Tool

Do you work in Contra Costa County? ☑ Yes ☐ No **If Yes, in which District do you work?**

Current Employer Aging Care Concierge
Job Title Founder, CEO
Length of Employment 1 1/2 yrs

How long have you lived or worked in Contra Costa County? 71 yrs

Board, Committee, or Commission CCC Advisory Council on Aging
Seat Name Vice Chairperson

Have you ever attended a meeting of the advisory board for which you are applying?
Please check one: ☑ Yes ☐ No If Yes, how many? 40+ meetings

EDUCATION

Check appropriate box if you possess one of the following:

☑ High School Diploma ☐ CA High School Proficiency Certificate ☐ G.E.D. Certificate

Colleges or Universities Attended	Degree Type/ Course of Study/Major	Degree Awarded	
DVC	AA	☑ Yes	☐ No
Chico, CSU	BA	☑ Yes	☐ No
Sacramento, CSU	MA	☐ Yes	☐ No

Occupational Licenses Completed: Certified Geriatrc Care Manager

Other Trainings Completed:

Certificate Awarded for Training?
☐ Yes ☐ No
☐ Yes ☐ No

Do you have any obligations that might affect your attendance at scheduled meetings? ☐ Yes ☑ No

If Yes, please explain:

Would you like to be considered for appointment to other advisory bodies for which you may be qualified? ☐ Yes ☑ No

Are you a veteran of the U.S. Armed Forces? ☐ Yes ☑ No

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Please explain why you would like to serve on this particular board, committee, or commission.

I am a Certified Geriatric Care Manager and founder of Aging Care Concierge and a passionate professional with an educational foundation in Social Welfare, Gerontology, and Public Administration. I believe I bring extensive experience in helping individuals age in place with independence and dignity. My career spans roles at the California State Department of Aging and leadership roles in community home care and hospice. I am active as an executive board member for Choice in Aging and serve on the board for Meals on Wheels Contra Costa. Additionally, I have served as an appointed member to the Contra Costa County Advisory Council on Aging for over 5+ years and served as Vice Chair on the Pleasant Hill Commission on Aging for 3 yrs. I believe that I lend my expertise to address the needs and challenges of the elderly in our Pleasant Hill community. My current role as a CGCM, I provide personalized support and guidance to individuals and families, helping them navigate the complexities of care and enhancing the quality of life for older adults in our community.

Describe your qualifications for this appointment. (NOTE: you may also include a copy of your resume).

BA in Gerontology
Masters in Public Administration
Certification as a Geriatric Care Manager
Membership in following Senior organizations:
Proserve
East Count Coalition
East BayVeterans Community Partnership
Pleasant Hill Commission on Aging
Contra Costa County Advisory Council on Aging
California Senior Legislature
Board of Directors for Meals on Wheels Contra Costa
Executive Board Memeber for Choice in Aging

I am including my resume with this application:

Please check one: ☐ Yes ☑ No

Are you currently or have you ever been appointed to a Contra Costa County advisory board?

Please check one: ☑ Yes ☐ No

If Yes, please list the Contra Costa County advisory board(s) on which you are **currently** serving:

Advisory Council on Aging

If Yes, please also list the Contra Costa County advisory board(s) on which you have **previously** served:

List any volunteer and community experience, including any boards on which you have served.

Please see above

Do you have a familial relationship with a member of the Board of Supervisors? (Please refer to the relationships listed under the "Important Information" section on page 3 of this application or Resolution No. 2021/234).

Please check one: ☐ Yes ☑ No

If Yes, please identify the nature of the relationship:

Do you have any financial relationships with the county, such as grants, contracts, or other economic relationships?

Please check one: ☐ Yes ☑ No

If Yes, please identify the nature of the relationship:

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I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I acknowledge and understand that all information in this application is publicly accessible. I understand and agree that misstatements and/or ommissions of material fact may cause forfeiture of my rights to serve on a board, committee, or commission in Contra Costa County.

Signed: Lorna Van Ackeren **Date:** 7/15/2025

Submit this application to: ClerkofTheBoard@cob.cccounty.us **OR** Clerk of the Board
1025 Escobar Street, 1st Floor
Martinez, CA 94553

Questions about this application? Contact the Clerk of the Board at (925) 655-2000 or by email at ClerkofTheBoard@cob.cccounty.us

Important Information

1. This application and any attachments you provide to it is a public document and is subject to the California Public Records Act (CA Government Code §6250-6270).
2. All members of appointed bodies are required to take the advisory body training provided by Contra Costa County.
3. Members of certain boards, commissions, and committees may be required to: 1) file a Statement of Economic Interest Form also known as a Form 700, and 2) complete the State Ethics Training Course as required by AB 1234.
4. Meetings may be held in various locations and some locations may not be accessible by public transportation.
5. Meeting dates and times are subject to change and may occur up to two (2) days per month.
6. Some boards, committees, or commissions may assign members to subcommittees or work groups which may require an additional commitment of time.
7. As indicated in Board Resolution 2021/234, a person will not be eligible for appointment if he/she is related to a Board of Supervisors' member in any of the following relationships: (1) Mother, father, son, and daughter; (2) Brother, sister, grandmother, grandfather, grandson, and granddaughter; (3) Husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, stepson, and stepdaughter; (4) Registered domestic partner, pursuant to California Family Code section 297; (5) The relatives, as defined in 1 and 2 above, for a registered domestic partner; (6) Any person with whom a Board Member shares a financial interest as defined in the Political Reform Act (Gov't Code §87103, Financial Interest), such as a business partner or business associate.

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