STEM Gets Personal: The Medical School Personal Statement as Developmental Writing Opportunity Amid Generative AI[1]

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Abstract: The rise of AI writing has contributed to worries about the personal statement in medical admissions, including questioning if the personal statement should still be part of applications at all. This manuscript argues that the medical school personal statement remains a significant developmental writing opportunity for STEM students. I first situate the personal statement historically by discussing the medical field's discomfort with subjectivity, which I connect to students' view that there is one right way to write a personal statement. Then I present data from 12 interviews with students who had written a personal statement for medical school in the last six months. I analyze these students' existing knowledge about the personal statement and accordingly, offer pedagogical opportunities and interventions rooted in this knowledge. My research assistants and I put this pedagogy into practice in a writing group over the course of fall 2023, and so I also share this process and the writing group's outcomes and feedback. Ultimately, I argue that the personal statement is valuable amid the rise of generative AI because the writing of the personal statement, especially when working in a trusted group and using solid writing pedagogy, can be a humanizing process for students in the dehumanizing, competitive process of medical school admissions.

The medical school personal statement occupies a strange space in the literate landscape of a pre-med student. It is an essay but is not written for or graded in a classroom setting with a teacher. It requires personal writing, which can be difficult for students who have been immersed in hard-science requirements or haven't written a personal essay since high school. It is short, extremely high stakes, and composed for an audience unknown to the student. It has no specific home in any course or curriculum, meaning that students seeking help to write it are diffused throughout the university—career centers, advising services, pre-professional classes, writing centers, and former instructors. Furthermore, personal statement advice extends beyond the academic realm. An online search reveals YouTubers claiming to be experts in what admissions committees are "really looking for," and applicants can pay for personal statement coaches charging thousands of dollars for everything from surface editing to writing full drafts, ready to take advantage of vulnerable applicants, who may be willing to pay a high price for whatever personal statement will get them in the door.2

In the context of this already commercialized and complex landscape, the fact that ChatGPT and other generative AI tools that can easily write and revise personal statements in seconds add yet another layer of complication. In 2024, the Association of American Medical Colleges added a statement to

their application directions that AI tools are allowed for "brainstorming, proofreading, or editing" medical school personal statements but also "it's essential to ensure that the final submission reflects your own work and accurately represents your experiences" (AAMC, p. 65). The medical admissions field, like the field of higher education, is confronting what "your own" writing means in the context of AI writing and what plagiarism looks like now. At the same time, AI has it benefits. The Modern Language Association, in a joint paper with the Conference on College Composition and Communication, notes that AI can help students "stimulate thought and develop drafts that are still the student's own work" as well as overcome "psychological obstacles to tackling invention and revision" (MLA-CCCC Joint Task Force on Writing and AI, 2023, p. 9), two challenges that are particularly salient for STEM writers who may have little experience with personal writing.

The medical school personal statement, then, is a case study for writing-across-the-curriculum (WAC) practitioners to understand a singular kind of literate activity that touches many interests of WAC: writing that crosses and transcends disciplinary boundaries; moves the student from novice to professional; requires STEM students to write personally, creatively, and artfully; and comes with real consequences. Now, because of the ease and availability of generative AI, the personal statement challenges admissions committees, med school applicants, and people who help students with writing personal statements to re-evaluate whether it is still important.

Previous research has shown that personal statements matter to students. Tom Deans (2022) interviewed 16 high-achieving STEM majors, asking them to bring to one interview a "text that represents them as a writer" (p. 167). Seven of these students brought some form of a personal statement for college, professional school, or a fellowship. Deans (2022) writes that while these students may be writing at the levels of professionals in their fields, they craved "opportunities to use narrative forms to explore themselves and their future selves" as people in their early 20s (p. 169). Personal statements are likely important to students because they fulfill the tenets of meaningful writing projects: they allow students to imagine their future selves and professional identities (Eodice et al., 2017, p. 33) and are "not merely about content or genre or process but also about mind and body, heart and head" (Eodice et al., 2017, p. 107).

In writing studies, researchers have engaged with personal statements primarily in terms of genre analysis. This work, mostly on large corpora of successful essays, lists the main features of personal statements—a hook opening, a discussion of the writer's academic background, and personal experiences that lead them to medicine (Bekins et al., 2004; Chiu, 2019; Ding, 2007). Analysis of large data sets, however, disconnects the writer from the finished product of the essay, losing the thinking and writing process behind the personal statement. Vidali (2007) suggests that college admissions essays are often viewed in black-and-white terms as "successful" or "unsuccessful," ignoring the fact that a human writer put time, energy, and thought into how to craft them. As Vidali (2007) argues, this distinction only serves to further erase "the rhetorical labor (and anguish) of student writers by narrowly focusing on institutional expectations and reception of student materials" (p. 616).

In this essay, I re-tether the writer to this complex and fraught writing task, theorizing the personal statement in terms of what it means to the student writer. Rather than focusing on the statements only, and rather than seeing those statements in simplistic terms of success or failure, my goal is to center the "literate activity" of the writer in the writing process. Kovanen et al. (2022) call for conceptualizing the writing of STEM writers beyond just disciplinary writing activities, looking more fully at "the richness and complexity of learners' lived, embodied experiences" and the "semiotic resources" STEM students use in writing (p. 64). Kovanen et al. (2022) use the term literate activity to move beyond mere documentation of STEM writing, and more into how STEM writers approach writing tasks, what resources they draw on in writing, and how they feel about writing (p. 64).

I first situate the personal statement historically by discussing the medical field's discomfort with subjectivity, which I connect to students' view that there is one right way to write a personal statement. Then I present data from 12 interviews with students who had written a personal statement for medical school in the last six months. I analyze these students' existing knowledge about the personal statement and accordingly, offer pedagogical opportunities and interventions rooted in this knowledge. While my research is rooted in the medical field specifically, the pedagogy I offer here transfers to knowledge about personal statements in general. My research assistants and I put this pedagogy into practice in a writing group over the course of fall 2023, and so I also share this process and the writing group's outcomes and feedback.

Drawing from the reflections of the personal statement writing group, I conclude by arguing that the personal statement serves a significant developmental function in helping students discern why they want to be medical professionals in the first place. The personal statement helps students through the stressful and isolating process of applying to medical schools, allowing them feelings of agency and control through articulating why they want to be a doctor. By selecting and framing their experiences, they gain clear, forward momentum. Ultimately, I argue that the personal statement is valuable amidst the rise of generative AI because the writing of the personal statement, especially when working in a trusted group and using solid writing pedagogy as I show here, can be a humanizing process for students in the dehumanizing, competitive process of medical school admissions.

Theorizing the Personal Statement: Subjective Writing in an Objective Field

Until the late 19th to early 20th century, American medical practice was about bedside manner, listening, and relying on experience to treat and diagnose patients (Borst, 2002). In the first half of the 20th century, however, a new paradigm for medicine emerged that valued gathering data systematically, and the image of a doctor shifted from "the caring figure hovering around the bedside to a man in a white coat, holding a test tube or looking into a microscope" (Borst, 2002, pp. 186-187). American medicine then began building its identity around the paradigm of objectivity (Borst, 2002). In fact, the Medical Aptitude Test (now known as the MCAT), was designed to provide a predictive and objective measure of an applicant's potential success, though of course these tests were biased toward information known to White men (Borst, 2002).

Research on medical school personal essay prompts from within the medical field demonstrate the anxiety of a profession that has staked its identity on objectivity encountering the subjectivity of written texts, the writing process, and the humanity of medical school applicants. White et al. (2011) found that applicants believe the essays are a chance to show themselves "from a personal, subjective perspective," in contrast to the objective intent of the process (p. e546). They end up recommending "avoiding questions which ask directly about the self" because they felt writers were just writing what admissions committees wanted to hear instead of a genuine response (White et al. 2012, p. 8). Albanese et al. (2003) are suspicious of the personal statement's abilities to measure anything about an applicant: first, because they believe the applicant may have had help in writing it, and second, because the free-form nature of the personal statement presents "non-standardized information" that makes it too hard to compare candidates (p. 318). Barton et al. (2004) surveyed 15 directors of medical residency programs, find that all but one rated the importance of the personal statement "3 or higher on a scale of 5," but when they asked what would get a student an interview for a residency, none of them mentioned the personal statement. When admissions committees have attempted to create rubrics and standardize the assessment of written essays, they are rarely able to agree on the quality of the essays (Salvatori, 2001). Because of the lack of validity and reliability in studies of the

written measures of medical admissions, Salvatori (2001) recommends that beyond the objective numbers of MCAT and GPA, random selection might be just as effective in selecting candidates.

Medical admissions has long been apprehensive about applicants fictionalizing personal statements or hiring contractors to write or revise them. Kumwenda et al. (2013) express concern over possible "embellishing" of medical and dental school personal statements as well as concerns about plagiarism (p. 599). More recently, the rise of AI writing has contributed to worries about the personal statement in medical admissions, including questioning if the personal statement should still be part of applications at all. In one study, 75% of anesthesiology residency program directors rated AI-generated personal statements as "good" and 63% rated them as "excellent" and were unable to distinguish AI-generated prose from human-written prose (Johnstone et al., 2023). Because Chat GPT can generate personal statements rated as equal in quality to human writing, Patel et al. (2023) have questioned whether the personal statement is valuable at all and if it should just be replaced with in-person communication (p. 325).

 While AI raises important questions about the role and value of traditional application materials, it also underscores a deeper issue at play: the longstanding tension between objectivity and subjectivity in admissions. I am not here to enter the debate between objectivity and subjectivity or to deem any admissions measure necessarily objective or subjective. I am interested in what this tension between objective and subjective means for applicants approaching personal statement writing. Applicants recognize that while the personal statement claims to allow for freedom and creativity, they must purport themselves in a way that is desirable to admissions officers whom they do not know. Based on interviews with applicants, White et al. (2012) developed a theory called "What do they want me to say?" (p. 8) to describe the way that applicants had a clear, shared sense of the way the medical school wanted them to answer, regardless of what the prompt asked. Writing about personal statements for psychology graduate programs, Brown (2004) noted that although the personal statement claims to be "autobiographical," the writer must carefully select narrative details that construct a convincing "professional persona" (p. 259). Despite the freedom promised in the personal statement prompt, Barton et al. (2004) argued that the personal statement is a "ritual display" where the writer must show they are memorable, accomplished, well-rounded, and professional in a way that makes them "a safe choice for the profession's gatekeepers." Playing it safe seems to be a common theme in the way students approach the fraught landscape of the personal statement, cautious that one wrong move could be used against them or sink their application. Reflecting on her choice to avoid talking about her own mental health experiences in her personal statement, Dr. Michelle H. Silver (2021) writes, "I have carefully curated and reframed my accomplishments to match what the authorities on the receiving end want to hear, filtering just enough to avoid being perceived as too weak or emotional, but not so much that I seem cold." Finding just the thing to say and the right way to say it can feel like a trap. Paley (1996) writes that students might feel "that omnipotent admissions committees are providing them just enough rope for a hanging" (p. 86).

While everyone on the Internet seems to be an expert on personal statements, academic study of medical personal statements remains challenging for several reasons. First, American federal laws protecting the privacy of students' academic work means that once a student matriculates into a program, their personal statement is considered protected as part of their academic record. Second, medical school personal statements are ephemeral in nature. In explaining the scant research on personal statements in the introduction to a special issue of the journal *Issues in Writing* back in 2004, Brown and Barton term them a "homely genre"—they are unappealing to study because they are too functional and only a handful of people ever read them. Bekins et al. (2004) point out that the genre of the medical school personal statement is only practiced by novices in the field and is evaluated by people who have probably only written one in their lives, many years ago.

Third, and perhaps most significantly, medical admissions committees are intentionally vague in what they are looking for in the admissions process for fear of getting sued. When I started this research project, my intention was to interview medical school admissions personnel to find out what they were looking for in personal statements. I learned from my university legal counsel, however, that they are not allowed to speak specifically about parts of the application because articulating precise criteria—as a good writing instructor would—exposes medical schools to legal and reputational risks. Many lawsuits, mostly pertaining to race-based admissions, have shown that overly specific admissions criteria can become evidence in court (see for example McGee, 2023; U.S. Department of Health and Human Services, Office for Civil Rights, 2025). Because of the legal liability, medical schools prioritize flexibility and legal defensibility over explicitness.

 This strategic ambiguity does more than serve a legal function: it also shapes the rhetorical situation students find themselves in. Paley (1996) says about the power dynamics created by the college admissions essay: "The institutional request for personal writing for an unknown audience with hidden criteria is one that immediately puts the student in his or her place in the academy" (p. 87). The college admissions essay, Paley (1996) argues, only prepares students to be powerless first-year college students who will unambiguously accept and comply with the rules of classroom protocol and academic discourse. For medical school admissions, White et al. (2012) note that the emphasis on "conformity" in medical school admissions is possibly "the first step in a longer, more sustained process of conforming which occurs throughout medical school and beyond" (p. 7).

As a result, scholars had previously concluded the medical school personal statement was an occluded or semi-occluded genre (Ding, 2007; Samraj & Monk, 2008; Swales, 2009), meaning a genre of academic writing that serves a gatekeeping function and is opaque to outsiders. But while there is no lack of examples of personal statements online, the pedagogy of the personal statement certainly remains occluded. Many of the personal statement coaches offering advice online claim to be medical professionals, and some even claim to have been on admissions committees, but knowing what a good personal statement looks like is different from knowing how to coach nervous applicants through the process of writing one. In essence, many of these coaches are Monday-morning quarterbacks, looking back at successful or unsuccessful statements, which is a different task than being the coach on the field, offering support and encouragement in the moment and through the process.

A Methodology for Re-Centering the Writer in the Personal Statement

Creighton University, where I teach, offers specialty advising, academic support, and co-curricular programming to help undergraduates reach medical school. However, we don't have a formal writing program, and our writing center is quite small and more focused on academic writing. As a result, students typically seek support for personal statements either through the Career Center or from individual professors rather than through a centralized writing program or writing center initiative. Because I teach first-year composition, many students come back to me in their junior and senior years to ask for help with the personal statement for medical school. (The current prompt used by the American Medical College Application Service, or AMCAS, is in Appendix A.) For years, students had been sending me their personal statements and meeting with me to talk about them, but I never felt satisfied with my feedback. Uncomfortable with the genre, and unsure of what medical school admissions committees were looking for, I often found myself commenting on superficial textual features and never really feeling like I was helping students with deeper revision.

Interviewing Protocol

To find out how students were approaching the medical school personal statement and what discursive resources they were bringing to the task, I recruited 12 students who had written personal statements in the last year for one-on-one interviews. All the participants were told about the study and consented to be interviewed and have their personal statements used for this research.[3] Seven identified as female, five as male, ranging in age from 21-23. Eight identified themselves as White, one identified as Asian/Chinese, one identified as Black and Chinese, one identified as Chinese-American, and one identified as Vietnamese.

With an undergraduate research grant, I trained two student researchers, Isabelle Senechal and Lily Dobesh, in qualitative interviewing. We conducted one-on-one interviews with 12 undergraduate students, asking them first about their goals for medical school and their history as a pre-med student. Then we asked more specific questions about their approach to the personal statement and the labor surrounding it: the time they spent on it, the people they asked for feedback, and their timeline and effort in composing it. Finally, to center their experiences and validate their labor, we asked about the content of the statement including what they wrote about, how they framed their experiences, and their intended effect on the audience.

Creating a Coding Scheme Using Grounded Theory

I analyzed these interview transcripts using grounded theory, an analytical method that creates theories that are grounded in the data, leading to a theoretical understanding of participants' experiences (Charmaz, 2014, p. 2). My coding followed two primary phases: initial coding and focused coding. Initial coding began with line-by-line coding, assigning short, action-oriented labels to each segment of text, with an emphasis on using gerunds to describe actions and decisions (e.g., "getting feedback," "expressing passion," "collaborating with peers"). This approach helped me identify tacit assumptions, implicit meanings, and significant actions within participants' narratives. After generating a set of initial codes, I moved to focused coding, where I identified the most analytically significant and frequently occurring codes. I compared codes across interviews using the constant comparative method, grouping similar codes into broader categories. Early codes such as "describing writing as physical labor" and "beginning to write" were consolidated into a category titled "explaining the writing process."

Once I had developed a rough version of the coding scheme, I began collaborating with another undergraduate researcher, Amelia Harahap, to refine and strengthen it. This collaboration was not just a practical step, but a methodological choice grounded in the principles of constructivist grounded theory. As Charmaz (2014) argues, the theories that emerge from research are inherently interpretive, shaped by the researcher's perspective and positionality—they do not exist independently of the researcher (p. 239). The undergraduate researcher served as a valuable second reader who could offer fresh insights on my data and provide an insider perspective on how undergraduates communicate and navigate the pre-med culture at my institution.

When we first met, I gave Amelia the rough version of the coding scheme and one of the interviews and asked her to attempt to apply the coding scheme to see how useful it was. We discussed "segmenting," or how to break up the interview into parts that could be coded (Geisler & Swarts, 2019). I used topical chains as my primary unit of segmentation, which Geisler and Swarts (2019) define as a unit of discourse that is about a single topic. I gave Amelia one of the interviews, a rough version of the coding scheme, explained the segmenting, and asked her to attempt to segment and apply the codes. We then met to refine the coding scheme, combining categories and adding in more thorough descriptions of categories to make them easier to apply and more inclusive of the data. I then gave her three more interviews and the revised coding scheme, and we met again to refine the

coding scheme, clarifying the descriptions of the categories. I took notes after each of our meetings to record emergent themes, modifications we had made, and possible avenues for further investigation. By employing Charmaz's grounded theory methodology, I was able to generate a coding scheme that is deeply rooted in participants' lived experiences, providing a nuanced understanding of students' writing process and thoughts about it. Satisfied with the coding scheme and with rules about how to segment the data, Amelia then coded the rest of the interviews on her own, 2-3 at a time, meeting with me after each to discuss concerns about how to segment or code.

Once we solidified the coding scheme, all data was entered and coded in Dedoose qualitative analysis software, which allowed us to quickly access the coded data which we wanted to examine more closely. We ended up with a total of 425 segments of data across the 12 interviews. The finalized coding scheme, descriptions of the codes, example data, and the code frequency can be found in Appendix B.

Analyzing and Making Meaning from the Coded Data

One code specifically, "conceptualizing the task," emerged as most interesting for us, because it provided insight into how students understood the personal statement. In these interview segments, the interviewees described what they thought a personal statement should do, what they knew about admissions committees, offered formulas for successful personal statements, and considered how an audience would perceive their writing. We valued these conceptualizations because each represented a "semiotic resource" (Kovanen et al., 2022, p. 64) the student brings to the writing process that influences the way they approach the task.

Drilling down into the segments coded "conceptualizing the task," we found three prominent themes: (1) a brain dump of good experiences is the best way to start writing, (2) writing a personal statement is a matter of checking the boxes to discuss each category of your experiences (service, research, shadowing, etc.), and (3) the goal of the personal statement is to get the writer into medical school. While none of these conceptualizations are necessarily incorrect or harmful, we felt they each represented potential areas of growth where we could intervene with writing pedagogy to help personal statement writers. We wanted to use these themes as a scaffold to create a pedagogy for writing the personal statement. In the sections below, I describe how each of the emergent themes from the "conceptualizing the task" segments inspired one of our pedagogical interventions.

A pedagogy for medical school personal statements is tricky because they have no specific home in a class; most personal statement coaching happens one-on-one when the instructor or advisor has time or in writing centers. What I've created then, is a series of concepts that will help instructors, advisors, or tutors quickly identify a problem area that students may be struggling with and a shift in thinking that could help them. I offer them in order of the process writers typically use, but each of the concepts below could be used piecemeal, one-on-one, or in groups.

To put each of these pedagogical interventions into practice the following semester, my undergraduate research assistant and I recruited four students who were just beginning their personal statements to be in a personal statement writing group. We created a writing group protocol (see Appendix C) with specific pedagogical interventions, rooted in composition pedagogy and designed around what we had learned in the interviews. Students received one-on-one coaching before they even started writing, and after they had drafts, worked in pairs to peer review each other's statements. The students weren't sure if they were applying to medical school that year or taking a gap year, so our goal in the writing group was to teach them how to be expert personal statement reviewers, both for their own statements and for others, rather than just create a finished document. I elaborate on each of these conceptualizations with examples from our interviews and connect each concept to a pedagogical intervention we made in the writing groups.

Figure 1 breaks down all the steps of this project. Table 1 specifies the work we did in phase 2 of the research—finding emergent themes from the students' interviews and turning them into pedagogical interventions, which we used in the writing group in phase 3. In the next sections, I detail each one of the emergent themes with examples and talk about how we turned our findings into pedagogical interventions in our writing group.
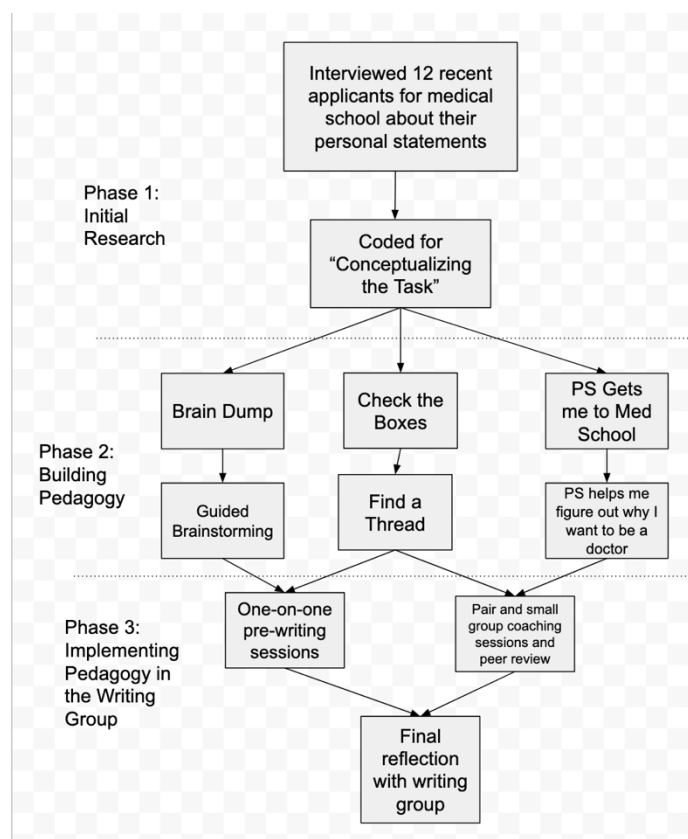

Figure 1: Phases of this Research

Table 1: Emergent Themes from Interviews and Subsequent Pedagogical Interventions

Students' Conception of the Personal Statement	Pedagogical Intervention
A brain dump of good experiences is the best start.	Early coaching trains students to theorize and reflect on their experiences. Students need practice and training in finding, selecting, and theorizing appropriate experiences.
Check the boxes (service, research, shadowing, etc.)	Unite the experiences around a common theme or thread.
The goal of the personal statement is to get me into medical school.	The goal of the personal statement is to figure out why I want to be a doctor.

From Brain Dump to Guided Brainstorming

To push through some of the initial stress they felt about getting started on the personal statement, many of the applicants we interviewed chose to begin their personal statements with a brain dump,

where one sits down and just writes down everything they can think of. The students described a brain dump as a very individual process. In a unique take on this, one applicant, Lea[4], shares that she heard one strategy where the writer begins drunk:

> I didn't do this, but I was recommended [to] by someone else, write your first draft drunk. Because the first draft is always bad so you want to just word vomit whatever you can onto the first draft and then take it from there. Start editing it, cut things out, add things in. Because once you have a thing, it's easier to edit.

In this passage, Lea re-voices advice she has heard from other applicants, which makes sense to her as a method to get started. Notably, the product of drunk writing is "word vomit" which may or may not be any good but at least results in some kind of text that can be edited eventually. Brain dumping is advice that came up regularly in our interviews and of course, is also a commonly accepted pedagogical strategy for teaching writing as a process (Bean, 2021, p. 9). Lea is correct that this method helps get words on the page; the problem is what to do after one has brain dumped and is now looking at a page full of "word vomit." My undergraduate researchers and I were concerned that writers became too attached to what they wrote (because it's done) and struggled to get rid of something they liked even a little, especially if they just wanted to get the personal statement over with. We were also concerned that writers didn't have a method or guidelines by which they could select the most effective parts of what they'd written.

Typically, the brain dump involves writing about every single meaningful experience one has ever had. The applicants thought that good quality experiences would directly lead to a high-quality personal statement. In this sense, writing a good personal statement was a matter of collecting experiences to write about. As Lea says later in our interview:

> So generally or at least the highly recommended pathway is that you begin collecting thoughts or ideas or experiences starting in August the year before the application cycle you're applying for, or even earlier than that if you have small snippets from freshman year or sophomore year if you're like, "Oh hey, that would be something interesting that I could maybe expand upon later in an essay or something like that."

As a result, in our first session with each of the four writers in our personal statement writing group, we met with each one-one-one. We told them to come prepared with some stories about why they wanted to be a doctor, but we did not ask for anything specific in writing. Our goal for this session was to have them do the brain dump out loud with a supportive audience that would help them, on the spot, select their experiences, offering advice and reflection on how their experiences would be perceived by an audience. We called this guided brainstorming. In a study of writing tutors coaching students through medical school personal statements, Brown (2010) found that students were helped when tutors narrated their experiences as a reader as they read through the personal statement, verbalizing "the impressionistic effect of the writer's words as they are encountered in real time" (p. 92). We took notes for them in the session—so they could focus on talking—and emailed them the notes after the session. We helped them sift through their experiences, reinforcing and fleshing out experiences that we thought would make for good stories for the personal statement and helping them to imagine how an audience would perceive their stories.

For example, in our first meeting with Joseph, a student who had an enormous amount of service and volunteering experience, we listened for a thread, or a central connective piece that would link all the diversity of his experiences together. We coached him on looking out for cliches as well, because students don't always have experience reading lots of personal statements. Something that emerged in this first coaching session with Joseph was "mindfulness in the medical setting," as Joseph

described being present to patients in a dementia ward while working as a CNA during COVID. Part of what we were doing in these sessions is highlighting for students what was interesting about them. We found that students—particularly high-achieving ones—had so much experience that they didn't always know what set them apart.

The students appreciated the one-on-one attention and said that it helped them greatly with their initial concerns about writing. In reflecting on the writing group experience, all four writers said the initial coaching session was the most important and formative, specifically for preparing them for the writing task ahead. One student, Keisha, said:

> [The personal statement] seems like such a daunting task that you don't really know where to begin. And so just coming and being able to speak to someone about, "These are my experiences. Do you think this would be a good thing to have in there?" And getting someone else's feedback on that was really, really helpful. And it gave me a place to start.

After her coaching session, Keisha said that most of the pre-med classes are "designed to cut you down," so she said that affected her confidence heading into the personal statement. She and Claire both felt that our coaching session built their confidence that the stories they felt like telling were significant and worthwhile, which helped with overcoming their initial writer's block.

From Checking the Boxes to Finding a Unifying Thread

To return to my earlier point about the dichotomy between subjectivity and objectivity in medicine, several of the conceptualizations outlined above actually point to students seeing the personal statement like an exam: a formula to follow, boxes to check, and one right answer. The process of applying to medical school itself can feel like a checklist: taking required pre-med classes, completing volunteering and shadowing hours, and getting a certain MCAT score. William seemed to view the personal statement as another checklist to integrate all the token experiences that they thought med schools would be looking for.

> Well, the first thing I did was we had a conference meeting, like a workshop, and I didn't have anything for it at that point. So I just wrote five separate paragraphs about ideas that could be in my personal statement. I had five different topics, basically. One was about volunteering, one was about being a camp counselor, one was about being a CNA, one was about shadowing, and then one was about my mom being a doctor. That was five.

William's conceptualization of the personal statement aligns with other research about personal writing. In teaching personal writing, George (2012) found that students thought about their identity as comprised of a series of historical facts about themselves that they simply narrated. The check the boxes mentality reflects a similar issue: students see their identity as a future doctor as composed of a series of events or activities that the admissions committee would find desirable. In coaching students through a personal essay, George attempts to help students see how past event are "perspectival, rather than factual" and moves them towards active construction of their own stories rather than passive narration, helping them construct their stories around a "narrative center," where they reflect on the past and what it means for them in the present (p. 327). Buell (2012) notes that for writing personal statements, it's not enough that writers have interesting experiences: they must find a compelling way of narrativizing them. When students can't imagine their audience and they don't know what their audience wants, they are less likely to write about potentially controversial issues like race or class (Buell, 2012).

In the initial coaching stages with our writing group, we listened carefully as each applicant talked about their meaningful experiences and made notes of possible threads. A good thread was rooted in the applicant's character, something that was fundamentally true about them. This quality should also be a quality that they see in doctors, and each experience detailed in the personal statement should be clearly infused with the writer's disposition or character. Barton and Brown (2004) note that the medical school personal statement is the only place in the application where the applicant can illustrate their "character in action," meaning their ability as storytellers to narrativize, animate, and give life to their service and shadowing experiences. The thread is important because it unifies the story, but it's also important because it answers the question, "Why doctor?" and connects each story back to that argument. For our writing group participants, this often involved explaining to them what was unique about their approaches to certain situations. Claire, for example, told us about her experiences shadowing a rural doctor and how he let her touch and examine part of a stomach he had removed from a patient. In her telling, Claire is excited and honored to touch a human organ for the first time, curious to see what it feels like. My undergraduate research assistant and I told Claire that if someone handed us a human organ we would run away or possibly pass out. But Claire's curiosity in this moment, including her examination of the stomach and the follow-up questions she asked the doctor, demonstrated her commitment to lifelong learning. Like Claire, students may not appreciate the ways they are different, unique, or special, or how their approach to certain situations is a testament to their character.

Another writing group participant, Sam, told us about growing up on a farm in rural Minnesota. He talked about how he admired the work ethic of his father and wanted to apply the same work ethic to his career as a doctor. In our coaching sessions, we helped Sam draw parallels between farmers and doctors and to talk about how his farming background had infused his character and would result in skills he could use as a doctor. Again, Sam had not realized that not everyone sees the world this way, and infusing his farming work ethic, learned from his family and upbringing, provided a thread to unify his experiences.

From Getting into Medical school to Figuring out Why I Want to Be a Doctor

The application that the admissions committee sees is a PDF document that begins with transcripts, then MCAT scores, then a listing of an applicant's "most meaningful activities" (like a resume but with paragraph-long descriptions of each activity and number of hours completed), followed by the personal statement and then letters of recommendation. One of the applicants sent me his full application and the personal statement didn't appear until the sixteenth page. Based on the order of the application, one can surmise that the numbers (GPA and MCAT) are what the committee prioritizes, then the quantification of the activities, and then finally the personal statement. Contextualized this way, the personal statement needs only to be satisfactory to the extent that it doesn't sink the rest of the application. Lea sees that the personal statement just needs to be good enough to get her through to the next stage of the admissions process:

> Interviewer: What are you hoping to accomplish with this statement?
>
> Lea: Get into med school. I just hope that the admissions officers read it and they're like "Okay, this person might be ready. We should get them an interview, see if we like them as a person."

To be clear, I did not encourage any writers to write something risky or potentially problematic. But the emphasis on conformity and safety, I think, prevents writers from deep or thorough reflection

and encourages superficiality. In this sense, the personal statement is written only with the audience of the admissions committee in mind.

I found that by paying attention to the personal statement—prioritizing it as a significant part of the application, getting to know students in the process of writing it, asking students to start early and work through multiple drafts—they get the sense that the personal statement isn't another box to check but is, in fact, something that requires some deep thinking and reflection and is worthy of their time. This process also re-calibrates the personal statement into something that can exist for an external audience but also for the student. The medical school personal statement is a rhetorical task unique from other types of graduate school personal statements because students tend to write about the doctor they want to be one day—not what they want to learn in school—creating what Newman (2004) calls the "professional imaginary" of medicine (p. 31). This rhetorical task—what kind of a doctor do I want to be? —is challenging, intimidating, and can certainly lead to cliched writing, but it also means that the personal statement can be a vocational discernment tool, instead of only a transactional tool to get students in the door of medical school. In reflecting with the writing group, they told me they felt many of their experiences were similar (likely a result of the checklist of requirements all pre-med students must complete), but writing the personal statement showed them what was special about their story:

> Claire: That first editing session kind of showed me that there is something unique about my story and that it will stand out. And that's something I had kind of been worried about. I'm like, "Well shoot, all of us here in the same room have the same experiences." [But] actually none of us have the same experience of--

> Keisha: All of our stories are vastly different.

Through coaching, the students in the writing group were able to see that they do have unique stories, their stories are not in competition with others, and they have something to say about why they should go to medical school. Their stories were not necessarily unique because of the content, but because of how those stories fit into the context of their lives and their ultimate desire to go to medical school. And while typically we would coach writers to consider their audience when writing, thinking about how they will be perceived by their audience can be stifling because that audience is intimidating. This is not to say that students should disregard audience when writing the personal statement, but that working in small groups and with supportive listeners can make that audience less scary. It also means that the personal statement can function as something you're writing to an audience and as something you're writing to yourself.

Conclusion: Humanizing Yourself in a Dehumanizing Process

Most of this research took place in 2022 and 2023, before generative AI tools were as powerful as they are now, meaning that the writers I interviewed were not thinking and talking about AI as we are at the time of this writing in 2025. Nonetheless, I believe their reflections suggest that the value of the personal statement amid generative AI: an opportunity for the applicant to humanize themselves in the dehumanizing and grueling medical school admissions process. In studying the connection between writing and professional identity, Roozen and Erickson (2017) suggest that one does not become an expert or professional in a field "by cutting ourselves off from all other domains of our lives and living evermore purely in some disciplinary center" but instead by "tying together and connecting all the resources we have developed in ever surer and richer ways" (ch 1.05). Drawing from Vygotsky, Roozen and Erickson (2017) show how being able to pull together one's semiotic resources and life experiences and deploy them for use in future actions offers people agency, control,

and identity. When personal statement writers select, frame, and theorize their experiences, they return to why they're doing the pre-med workload in the first place; they get a chance to cohere of all the service, volunteering, and shadowing hours they've been doing; and they get to tell their own story.

The de-humanizing process of medical school admissions came up several times throughout our interviews. I noticed a phenomenon similar to what Lisa Emerson (2016) finds in her interviews with scientists about their writing: the interviewees use the second person to describe the "correct way" to do something regardless of what they actually did (pp. 21-22). Emerson (2016) identifies this as a strategy that her participants used to avoid personal disclosure, but I also felt that the second person may have also reflected the way the applicants feel dehumanized in an admissions process that is individualistic, competitive, and isolating. One student told me she and her friends who were also applying made a pact that they would not talk about the success of their applications for an entire year. Another student told me that he had stopped being friends with a student who was constantly talking about where he got in to medical school. Another said that in their pre-med seminar, one student refused to share a draft of his personal statement at all because of the competitive nature of the admissions process. When a personal statement is composed in a trusted group and framed as a pedagogical journey, it is no longer an anxiety-ridden transactional document that just needs to be good enough; it is a meaningful writing product of self-reflection and forward momentum that offers applicants a feeling of control and agency over a largely opaque admissions process.

A collaborative process of writing personal statements with a trusted small group, drawing from what we know about writing pedagogy, might do wonders to pull students out of an individualistic mindset. These writing groups might be run through pre-professional advising, writing centers, or through writing programs—wherever students tend to look when they need further support with writing on campus. Upper-level WAC courses in STEM might also present a location for these writing groups. In reflecting on the writing group, Keisha noted that a personal statement connotes solitude:

> It's so crazy. I walked into this [writing group] being like, oh, personal statement. It's personal, right? That's in the word. It's just going to be about me. I just have to focus on myself and whatnot. But honestly, having these group sessions was so important to actually being able to edit it down. I am so glad that you asked me to do this because otherwise I probably would've just sat and written it alone and not asked anyone to go over it. And I would've been sad and just me in my room, writing my little personal statement.

Much of what I have advocated for in this piece is rooted in recognizable rhetorical and pedagogical traditions that have proven effective across genres: pre-writing, one-on-one conferencing, organizing details around a central idea, critical reflection, and thoughtful, self-aware storytelling. The structure we taught students reflects the tradition of the personal essay and aligns with rhetorical principles of ethos and self-presentation. As Domínguez Barajas (2025) argues, personal writing functions not only as self-expression but also as a form of rhetorical positioning that allows students to negotiate their identities in institutional contexts. By connecting students' personal statements to the tradition of the personal essay, we can help them see that developing "character" is both an ethical and rhetorical act—an opportunity to shape how they are perceived as future physicians. Furthermore, Hoermann-Elliott and Williams (2023) show that scaffolded personal and professional writing assignments can help underrepresented writers build self-efficacy and agency. Framing the medical personal statement in this way situates it within a well-established pedagogical lineage that values reflective, narrative-driven writing as a site for cultivating both authenticity and rhetorical awareness.

Ideally, this work will also build applicants' confidence and agency in an admissions system that makes them feel powerless. Research has consistently shown that medical students have higher rates of anxiety, depression, burnout and other mental health problems than the general population (Dyrbye et al., 2006), all of which worsened due to the COVID-19 pandemic (Santander-Hernández et al., 2022). While I cannot guarantee that this pedagogy will guarantee admission into medical school, a humane pedagogical process of writing the personal statement, through reflection and collaboration, can be healing for students in a competitive, high-stress environment. Research has shown that personal writing about one's values and emotions, similar to the kind of writing one would do for a personal statement, can help students with test anxiety (Jordt et al., 2017; Ramirez & Beilock, 2011). It stands to reason that the personal statement can serve as a way for students to work through both their stress about medical school as well as re-affirm their values about why they want to be a doctor. As a result, regardless of its success in getting an applicant into medical school, and regardless of the temptations of generative AI, the personal statement is valuable as a port in the storm for students in the storm of medical school applications.

Appendix A: Personal Comments Essay Prompt

Consider and write your Personal Comments Essay carefully; many admissions committees place significant weight on the essay. Here are some questions you may want to consider while writing the essay:

- Why have you selected the field of medicine?

- What motivates you to learn more about medicine?

- What do you want medical schools to know about you that has not been disclosed in other sections of the application?

In addition, you may wish to include information such as:

- Unique hardships, challenges, and obstacles that may have influenced your educational pursuits.

- Comments on significant fluctuations in your academic record not explained elsewhere in your application.

Please keep the following in mind:

- Proofread carefully! No changes (including corrections to grammatical or typographical errors) may be made to your essay after you submit your application to the AMCAS program.

- You can't run a spell check in the AMCAS application, but most browsers have built-in spell checking that you can enable. Use English (United States) characters; other characters may not be accurately recognized.

- Medical schools prefer to receive applications that follow normal writing practices regarding the case of letters. You should avoid using all uppercase or all lowercase letters for the text responses in your application.

- Plagiarism or misrepresentations may result in an investigation. You may use artificial intelligence tools for brainstorming, proofreading, or editing your essays. However, it's essential to ensure that the final submission reflects your own work and accurately represents your experiences.

- It isn't necessary to repeat information reported elsewhere on your application.

- The essay will be sent to all medical schools you apply to.
- The space allotted for the essay is 5,300 characters, or about one page. Spaces are counted as characters. You will receive an error message if you exceed the character limit.

Appendix B: Personal Statement Interviews Coding Scheme

Code	Description	Example Data	Code Frequency (# of times coded out of 425 segments)
Being Pre-Med at Creighton University	• Speaker expresses a direct connection between Creighton University and their pre-med experience • Speaker attributes their choice of studying medicine in undergrad to attending Creighton University	I think I wrote the first draft way back in January, because there's a writing workshop for the [pre-med seminar] that they make you go through	51 or 12%
Conceptualizing the Task	• Speaker tends to use "you" statements to describe what the applicant must do in the personal statement • Speaker demonstrates knowledge of the admission process well before applying • Speaker theorizes about what admissions committee is looking for in personal statement • Speaker conceptualizes what a personal statement is or should be, either from advice or personal sense • Speaker gives a "formula" for what the personal statement should be (e.g. "show don't tell") • Speaker takes into consideration the perspective of the audience of their personal statement: "What they're looking for"	I had older students tell me to start it earlier rather than later. I think that was definitely helpful. Even doing some of the stuff now, I wish I would have started sooner rather than later. One of my professors was telling me, 'It doesn't have to be this picture-perfect thing. Most kids don't have this huge life changing event that totally changed their career path and blah blah blah. They just want to know you aren't doing it for the money or you aren't doing it because you think you'll look good in a white coat. They want to know you have some	133 or 31%

		sort of actual motivation to do it.	
Grappling with Feedback	• Speaker explains the process of requesting feedback, using feedback, and/or incorporating feedback, including feedback that they ultimately did not use, whether from peers, tutors, friends, and/or family • Speaker tends to use "we" and "our" • Speaker explains choices about or judgements about feedback • Speaker mentions collaboration with peers in the process of writing or editing their personal statements	Once I build up the courage and write the actual ending to the personal statement, I will definitely ask around, probably my sister and my roommate and definitely my mom to look it over . . . I want to make it more meaningful to me, as well as, if I do share it, I want it to be a story that makes sense to people who know me.	67 or 16%
Explaining the Writing Process	• Speaker typically makes "I" statements • Speaker explains how they personally understand, frame, or approach the writing task • Speaker discusses the process of putting together the pieces of the statement • Speaker discusses the degree to which the pieces of the statement "flow" or fit together • Speaker explains internal dialogue about writing • Speaker discusses the physical labor of writing • Speaker describes what they do when they write • Speaker explains or discusses choices they made about or during the writing process	Originally, what I had was the story about my mom. . . I had it in chronological order, so I had my mom first and then working as a CNA next and then tutoring after that and then shadowing and then a conclusion.	173 or 41%

Appendix C: Personal Statement Writing Group Protocol

Meeting # and Topic	Prepare in advance	During the meeting	Outcomes by the end of the meeting
	Read up on personal statements; Practice in reflective writing		
1. Individual coaching (possibly more than one)	3 stories about why you want to be a doctor	Coach for thread and prevent red flags	Writers will have identified 3 stories to write about and at least one possible thread
2. Group Meeting	Full draft they feel "semi-good" about; Reflect about it	Show good and bad examples from research	Writers will be able to identify strong/weak examples
[possible week off for thinking]			
3. Group meeting (possibly more than one)	Full draft that writer feels ownership over; Reflect about it	Read drafts aloud; Discuss constructive criticism and offer constructive criticism	Writers will be able to give and receive useful feedback on statement
[possible week off for thinking]			
4. Group meeting	Close-to-finished draft; Reflect about it	Editing; Reflect together on the learning process	Writers are prepared to be helpful peer reviewers to others (and themselves)

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Notes

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[2] I intentionally do not cite examples of the YouTubers or personal statement coaching I mention in this manuscript because I do not want to give them clicks, as I believe many are scammers. Readers are welcome to google "personal statement advice" on their own to see examples.

[3] This study went through the IRB approval process at my university and was declared exempt. All undergraduate researchers and I completed the required IRB training.

[4] All names are pseudonyms.

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