For Office Use Only (GSA) Restricted access to viva approved?	Yes / No	
Time Specific viva required?	Yes / No	Date required by: / /
Thesis title on eVision matches title on GSC		Date required by: / /
	.5 🖬	CCA Asknowledged:
Thesis submitted / due to be submitted on:	/	GSA Acknowledged: (Initials)



APPLICATION FOR APPOINTMENT OF EXAMINERS

(D.Phil., M.Litt. M.Sc. By Research)

Candidates should read the notes entitled 'Notes of Guidance for Research Examinations' (GSO.20a) before completing this form and should return it to the relevant Graduate Studies Assistant (*please refer to* www.ox.ac.uk/students/academic/guidance/graduate/contacts for contact details) prior to thesis submission. The thesis should be submitted separately to the Examinations School. DPhil students: Confirmation of Status must be complete prior to the exam process commencing.

SECTION 1 - to be completed by the candidate. Please use BLOCK CAPITALS in all sections except 'Title of thesis'.

Surname:	Rainforth					Title (Mr/Mrs/Miss/M	s/etc):	Mr	
First Name (in full):	Thomas		Student Number:			761710			
College:	Wolfson			Department:		Engineering Science)		
Award for which you (i.e.: DPhil/MSc By Resear	wish to sub	bmit your	thesis:	DPhil					
Address for correspondence (after submission of thesis): 45 Harbord Road, Oxford, OX28LH									
Telephone Number:		774665	6915						
Email Address - email communications from the Examination Schools relating to the examination of your thesis will be directed to your primary email, as indicated on Student Self Service. Please log in at www.evision.ox.ac.uk/ to check or amend your contact details.									
Title of thesis: This is	the title that w	vill appear o	n your thesis an	d transcript. (Pleas	e print clea	rly including any desired cap	italisation,	punctuation,	etc)
Automating Inference, Learning, and Design									
Please indicate wheth	ner you are	e request	ing a chang	e of thesis title	:		☐ Ye	es 🗸	No
If Yes , please state ye (Please note: if you are rec					also subm	nit a separate GSO.6 (Char	nge of title) form)	
Where submission of an integrated thesis is permitted by special regulations please indicate if you have received approval to submit an integrated thesis: https://www.admin.ox.ac.uk/examregs , Yes Vo									
Research Council-funded candidates: If you are requesting a change of topic, rather than an amendment to your existing title, please confirm that you have consulted with your funding body and received approval: (If Yes, please attach any relevant documentation) (If you are an AHRC-funded student requesting a change of topic that has not yet been approved, you should contact the AHRC Studentships Officer now: ahrccomp@admin.ox.ac.uk)									
☐ Yes									
		lo	Name of fur	nding body:					

SECTION 2 – statements to be completed by the candidate.

Please complete as appropriate in each case and supply details on a separate sheet if necessary (please note that copies of any separate sheets will be sent to your examiners, along with your thesis).

2.1 Statemen	2.1 Statement of previous acceptance or concurrent submission of thesis for degree (please tick one box only)				
	No part of my thesis has been accepted or is currently being submitted for any degree, diploma or certificate or other qualification in this University or elsewhere.				
	I attach on a separate sheet details of which part of my thesis has been accepted or is concurrently being submitted for a qualification in this University or elsewhere and I confirm that these are full and accurate. (Please attach THREE copies)				

2.2 Statemer	nt of authorship (please tick	(one box only)		
	I confirm that the thesis I a	am submitting is who	olly my own work.	
Ø	I attach on a separate she THREE copies)	eet details of which p	arts of my thesis are not my	own work. (Please attach
2.3 Sensitive	content			
			a sensitive nature or where epositing the thesis in the Bo	
2.4 Statemer	nt of thesis length			
the approximate submission of	e number of words in their thes	is. Permission to exc d a copy of the appro	concerning word/page limits, ar seed the word/page limit must oval letter attached to this for	be sought prior to the
Number of wo	er of words/pages: 250			
2.5 Transfer	of Status			
Term transfer Research:	red from PRS to D.Phil., M.L	itt. or MSc by	Michaelmas 2015	
	ntion of Status (for D.Phil. C t you must have completed your		before submitting your thesis.	
Term D.Phil.	status confirmed:	Trinity 2017		
SECTION 3 -	submission details to be con	npleted by the candi	date.	
3.1 Submiss	ion of thesis and abstract	- please read carefu	lly the notes accompanying t	this form (GSO.20a)
Please indica	te when your thesis and abs	tract will be submitte	ed. Please tick <u>one</u> box onl	y:
	(a) Two copies of my thes Examinations School on:	is and of the abstrac	t were submitted to the	1 1
	(b) Two copies of my thesi Examinations School befo		t will be delivered to the	07 / 10 / 17
Ø	Note: this date may not be la being submitted. For clarifica academic/guidance/graduate	tion consult the releva	f the vacation immediately follow nt Graduate Studies Assistant (\)	wing the term in which this form is www.ox.ac.uk/students/
		e on initial submissi	on	
3.2 Resubmi	ssion fee – no fee is payabl			
	ssion fee – no fee is payable bmitting your thesis?			☐ Yes ☑ No

where necessary to enquire whether you would like the examiners' copies of your thesis returned. If you do not respond within 6 months, the copies will be destroyed.

I understand that information provided on this form will be held on the University's administrative computer system for the purposes of student administration subject to the Provisions of the Data Protection Act (1998) and I agree that if successfully defended details of my thesis can be included in the publication of successful candidates for research degrees, which is circulated as appropriate to a number of libraries and other academic institutions in Europe, Canada and the USA.

I confirm that all the details given and declarations made are full and accurate.

Signature:	Mentha	Date:	01/09/17
	11-9100		

Please also ensure that the following sections are completed by your supervisor and college before the form is returned to the relevant Graduate Studies Assistant - (please refer to www.ox.ac.uk/students/academic/guidance/graduate/contacts/ for contact details).

Statement by the supervisor

candidate has made in SECTION 1 of this form.

SECTION 4 – to be completed by the supervisor in consultation with the candidate. (BLOCK CAPITALS)

1. I have consulted with the candidate as required above. I support any application for change of thesis title which the

The supervisor is required to consult with the candidate concerning possible examiners, and to forward to the relevant board the names of suggested examiners together with details of any special considerations which the candidate or supervisor wishes to make known about any potential examiners. Where supervisors have other points about the thesis or examination which they wish to put to the board for possible communication to examiners, they are asked to do so on a separate sheet.

 I certify that the candidate named above has pursued at Oxford the required course of research for the following number of terms in accordance with the provisions of the Examinations Regulations stated below 								9
	Minimum of 6 terms for D.Phil. (3 terms if candidate holds Oxford M.Litt., M.Sc., or M.Phil.). Minimum terms for M.Litt. Minimum of 3 terms for M.Sc.by Research.							Terms
3.			ominated external exan at may be deemed cor		serve) does no	t fall into		
	Two examiners a	re required, normally	one internal examin	er and one exter	rnal examiner	(and one r	eserve for ea	ch).
FII	RST CHOICE EXAM	INERS						
Int	ernal examiner:					Informally	invited?	
Fu	Il name (including titl	e and forename):	Prof Stephen Roberts	3			•	
Сс	llege (where applica	ble)	Somerville College					
Sta	atement of Suitability	/Additional Information	n (Oriental Studies req	uirement/Optiona	l)			
Ох		Quantitative Finance Vell Road, Oxford. OX	2 6ED					
Те	ephone number:	+44 (0)1865 616626		Email address:	sjrob@robots	.ox.ac.uk		
Ex	ternal examiner:					Informally	invited?	V
Fu	Il name (including titl	e and forename):	Prof Mark Girolami					
Cu	rrent position held:		Chair in Statistics, Im	perial College Lo	ndon			
Sta	atement of Suitability	/Additional Information	n (Oriental Studies req	uirement/Optiona	1)			
Ad	dress:							
So	9 Huxley Building uth Kensington Cam nsington, London SV	pus, Imperial College N7 2AZ	London					
Те	ephone number:	+44 (0)20 7589 5111		Email address:	m.girolami@i	mperial.ac.u	ık	

Telephone number:

+44 12237 62363

SECOND CHOICE EX	AMINERS							
Internal examiner (res	serve):				Informally invited?			
Full name (including titl	le and forename):	Dr Sam Staton						
College (where applica	ble):	Jesus College						
Statement of Suitability	/Additional Information	n (Oriental Studies req	uirement/Optiona	l)				
Address:								
Room 421, Department of Computer Science Wolfson Building, Parks Road Oxford OX1 3QD								
Telephone number:	+44 (0)1865 (2)7389	3	Email address:	sam.staton@)cs.ox.ac.uk			
External examiner (re	serve):				Informally invited?			
Full name (including titl	le and forename):	Dr José Miguel Hernández-Lobato						
Current position held:		University Lecturer in Cambridge	n Machine Learnin	g, Departmen	t of Engineering, Universi	ty of		
Statement of Suitability	/Additional Information	n (Oriental Studies req	uirement/Optiona	l)				
Address:								
	Department of Engineering							
University of Cambridg	е							
Trumpington Street Cambridge CB2 1PZ, U	IK							
- Cabridge OB2 11 2,								

Email address: jmh233@cam.ac.uk

Supervisor:		
Full name (including	g title and forename): Dr Frank Wood	
Address for corresp	oondence:	
IEB 20.03, Dept. of University of Oxford Parks Road Oxford OX1 3PJ	Engineering Science	
Email address:	fwood@robots.ox.ac.uk	
Signature:		Date: 01/09/2017

GSO.3

GSU.3						
Joint supervisor (if applicable): If you have further supervi	sors please attach de	etails on a	separate sheet.		
Full name (includin	g title and forename):		Dr Michael Osborne			
Address for corresp	oondence:					
	of Quantitative Finance Well Road, Oxford. OX2 6ED					
Email address:	mosb@robots.ox.ac.uk					
Signature:	Mane		Date:	03/09/2017		
	completed by the college	I				
Does the college so	upport the application:		Yes	□ No		
Comments on beha	alf of the college:					
Signature:		Date:				
Full name:		Position:				
College stamp:						
known to the examin	reminded that where it is felt appropriate for ers (where this would not prevent the candida ast be submitted by the college to the Proctors	ate from attending the v	a candidate iva but mig	e's medical condition to be made ght adversely affect his or her		

SECTION 6 – to be completed by the Director of Graduate Studies (or equivalent)

I certify that this ap	plication has the approval of the candidat	te's department	☐ Yes	☐ No
Signature:		Date:		
Full name:				
	se indicated, approval of this application will be ndidate in SECTION 1.	oe taken to include app	proval of any change to the	esis title which has
SECTION 7 – Restri	ction of access at the viva (to be complet	ted if appropriate)		
Restriction of acc	ess at the viva			
Physiological Scie attendance of any p subject to such con Applications should would put at risk co thesis, and provide	es in Biological Sciences, Clinical Mediences, and Psychological Studies, a caperson or all persons at an viva (other than ditions as the Proctors may impose. If indicate the reason for the request, e.g. on fidential material or invalidate an applicate sufficient information for an informed judid be supported by the supervisor.	andidate, supervisor an the candidate and that the presence of ation for a patent on	or department may require the examiners) should someone other than the a product or process or	uest that the be forbidden or e examiners overed by the
I request that acces if necessary.	ss to the viva should be restricted for the	following reason(s):	Please supply supplem	entary material
Signature:		Application made by:	☐ Candidate ☐ ☐ Head of Dep	l Supervisor artment
In the case of app	lications made by the candidate:			
I support the above	application for the restriction of access t	o the viva for the foll	owing reason(s):	
Signature of supervisor:				

GSO.3. Revised July 2017

This form should <u>only</u> be completed and included in the GSO.3 where an examination result is required by a specific date, and for <u>exceptional circumstances</u>. The form should not be used to specify certain dates when an examination is preferred / not preferred – this should be negotiated directly in consultation with the examiners.

SECTION 8a – Application for Time Specific Examination

Applications can only be agreed for <u>exceptional reasons</u>, since the availability of examiners of national and international reputation is likely to be limited. Students and supervisors should not expect that applications for a time specific viva will be approved automatically.

earlier than one caler	y to the relevant board for the viva to be held ndar month after the date on which the thesis have agreed to act, whichever is the later. Als	has been received at	the Examination	n Scho	ols or after the date on
Date by when you	wish to have your viva:				
Reason for request	:: (please continue on separate sheet if no	ecessary)			
SECTION 8b – to be	e completed by the supervisor				
Supervisor's remar	ks: (please continue on separate sheet if	necessary)			
Ciara atura a		Data			
Signature:		Date:			
Full Name:					
SECTION 8c – to be	e completed by the Director of Graduate S	Studies (or equivale	ent)		
Approved:			Yes		No
Signature of		Date:			
DĞS:					
Full Name:					

Regulations

GSO.3 (optional – Time Specific Examination Request)

Candidates may apply to the board of the faculty or department concerned for the oral examination to be held not later than a certain date, provided that this date shall not be earlier than one calendar month after the date on which the thesis has been received at the Examination Schools or after the date on which the examiners have agreed to act. whichever is the later. If the board is satisfied that there are special circumstances justifying this application, it will ask the examiners to make arrangements to enable the oral examination to be held within the period specified.

In such cases the examiners, when invited to act, will be informed that the candidate has asked that the oral examination should be held not later than a certain date, and acceptance of the invitation to examine will be on the understanding that they would seek to meet this request. If it is not practical to meet the student's request, then the board/department shall decide how to proceed.

Note: Students must ensure that they can be readily contacted by the Research Examinations Team so that, if examiners are unable to meet a request for a viva by a certain date, alternative arrangements can be discussed.

Where students wish to apply for a time-specific examination, the form and the application for the appointment of examiners (GSO.3) should be submitted <u>BEFORE</u> the thesis so that the necessary approvals can be given in good time.

GSO.3. Revised July 2017